United Nations A/66/PV.114

General Assembly
Sixty-sixth session

Official Records

114th plenary meeting
Friday, 8 June 2012, 12.40 p.m.
New York

President: Mr. Al-Nasser. . . . . (Qatar)

The meeting was called to order at 12.40 p.m.

Programme of work

The President: In the light of the need for further consultations among the regional groups regarding the candidatures for the Chairs of the Main Committees for the sixty-seventh session of the General Assembly, the elections of the Chairs and bureaux of the Main Committees are postponed to a later date, to be announced.

I should now like to consult members with a view to proceeding to the election of the Vice-Presidents of the Assembly for the sixty-seventh session.

In accordance with rule 30 of the rules of procedure of the General Assembly,

> "The Vice-Presidents shall be elected after the election of the Chairmen of the six Main Committees referred to in rule 98, in such a way as to ensure the representative character of the General Committee."

It is my understanding that the elections of the Chairs of the Main Committees will conform with annex II of resolution 48/264, of 29 July 1994, and will not have an impact on the geographical distribution of the Vice-Presidents of the Assembly and the representative character of the General Committee.

If there is no objection, I shall take it that the General Assembly therefore agrees to proceed to elect the Vice-Presidents of the General Assembly.

It was so decided.

Agenda item 6

Election of the Vice-Presidents of the General Assembly

Election of the Vice-Presidents of the General Assembly for the sixty-seventh session

The President: In accordance with rule 30 of the rules of procedure of the General Assembly, we shall now proceed to the election of the Vice-Presidents of the General Assembly for the sixty-seventh session.

All members of the General Assembly are eligible in this election except those already represented in the General Committee, namely, the country whose representative has been elected to the presidency of the General Assembly.

In accordance with paragraphs 2 and 3 of the annex to resolution 33/138, of 19 December 1978, the 21 Vice-Presidents of the General Assembly for the sixty-seventh session shall be elected according to the following pattern: six representatives from African States, five representatives from Asian States, three representatives from Latin American and Caribbean States, two representatives from Western European and other States, and five representatives from the permanent members of the Security Council.

In accordance with paragraph 16 of General Assembly decision 34/401, the election of the Vice-Presidents of the Assembly by secret ballot will be dispensed with when the number of candidates corresponds to the number of seats to be filled.

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We shall proceed accordingly.

I shall now read the names of the slate of endorsed candidates:

African States: Algeria, Angola, the Congo, Ghana and Sierra Leone.

Asian States: Afghanistan, Bangladesh, Lebanon, Nepal and Palau.

Latin American and Caribbean States: Honduras, Peru and Trinidad and Tobago.

Western European and other States: Israel and the Netherlands.

Since the number of candidates corresponds to or is less than the number of seats to be filled in each region, I declare those candidates elected, in addition to the five representatives from the permanent members of the Security Council.

The following States have therefore been elected to vice-presidencies of the General Assembly for the sixty-seventh session: Afghanistan, Algeria, Angola, Bangladesh, China, the Congo, France, Ghana, Honduras, Israel, Lebanon, Nepal, the Netherlands, Palau, Peru, the Russian Federation, Sierra Leone, Trinidad and Tobago, the United Kingdom of Great Britain and Northern Ireland, and the United States of America.

I wish to take this opportunity to congratulate the States which have been elected to vice-presidencies of the General Assembly for the sixty-seventh session.

I also wish to inform members that the election of an additional Vice-President from among the African States will take place at a later date to be announced.

I wish to remind members that the Chairs of the Main Committees have not yet been elected. After the election of an additional Vice-President of the General Assembly and the Chairs of the six Main Committees, at a later date, the General Committee of the General Assembly for the sixty-seventh session will then be fully constituted in accordance with rule 38 of the rules of procedure.

The meeting rose at 12.50 p.m.

United Nations A/66/PV.115

General Assembly
Sixty-sixth session

Official Records

115th plenary meeting
Monday, 11 June 2012, 10 a.m.
New York

President: Mr. Al-Nasser. . . . . (Qatar)

In the absence of the President, Mr. Zinsou (Benin), Vice-President, took the Chair.

The meeting was called to order at 10.15 a.m.

Agenda item 10

Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declarations on HIV/AIDS

Report of the Secretary-General (A/66/757)

Draft decision (A/66/L.49)

Statement by the President

The Acting President (*spoke in French*): I shall make the following statement on behalf of the President of the General Assembly, His Excellency Mr. Nassir Al-Nasser.

(*spoke in English*)

"One year ago, at a high-level meeting of the General Assembly (see A/65/PV.95), Member States unanimously adopted the historic Political Declaration on HIV and AIDS (resolution 65/277, annex). The Declaration helped to shape the endgame of the AIDS crisis. Member States set clear targets to reduce the transmission of HIV. Today, we come together to review the progress made since that adoption.

"In reflecting on the past year, I am struck by the avid commitment of Member States to realizing our shared values and shared responsibilities. That commitment has inspired a new unity of purpose, a resolve to focus on results and an opportunity to carve out clear roles for Governments, donors, civil society and the United Nations.

"Today, we are riding a wave of renewed hope and are accelerating progress against HIV. We are achieving dramatic reductions in new infections in the hardest hit countries and among young people worldwide. We are also seeing a dramatic scaling-up of treatment in low- — and middle-income countries, from thousands to millions of people in just one decade.

"The AIDS response has had a profound impact on human health and development, advancing the agendas of human rights, social justice and gender equality while helping to build more inclusive societies and moving science forward in the service of people.

"Yet, critical challenges remain. HIV still disproportionately affects vulnerable populations. Populations at higher risk face additional stigmatization and discrimination, which only fuels the epidemic.

"Funding is in decline, thereby diminishing the ability of the international community to sustain the necessary progress. Today's plenary meeting is taking place just over three years before the 2015 deadline to achieve critical targets set by Member States in the Political Declaration. We must ensure that the commitments that were made are

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implemented so that we can redirect the course of the epidemic and avert future costs to society.

"It is critical that we support the integration of HIV prevention, treatment, care and support into relevant health and development programmes. Such programmes include those on sexual and reproductive health, maternal and child health, gender equality, non-communicable disease responses and the strengthening of health systems. We must explore ways by which the scaling up of HIV prevention, treatment, care and support may be leveraged to strengthen not only high-quality health services during specific periods of life, such as pregnancy and childhood, but also to respond to a range of other health conditions and development challenges — challenges such as food security, poverty, drug dependency and the fulfilment of human rights.

"We must also use today's high-level meeting as an opportunity to reflect on the linkages between AIDS and the Millennium Development Goals (MDGs), and in preparation for the upcoming MDG review. The post-2015 development agenda must depend on a strong vision that unites all components of the social sector — health, education, social protection and others.

"Achieving the 10 targets set out in the 2011 Political Declaration is a worthy and achievable aim. But it is not a journey towards a single outcome. Built into the AIDS movement is vast potential for global change that will be felt far beyond 2015.

"It is up to every single one of us — Member States, civil society, the private sector and individuals — to work together to step up the campaign and implement the commitments made for a better tomorrow.

"Together we must act strategically and effectively to achieve the vision of a world with zero new HIV infections, zero discrimination and zero AIDS-related deaths. That is a world I wish for us all."

(*spoke in French*):

I now give the floor to His Excellency Secretary-General Ban Ki-moon.

The Secretary-General: One year ago this week, the international community met here at the United Nations to advance the struggle against HIV/AIDS. In the General Assembly and the Security Council, in the hallways and at side events, Governments, intergovernmental organizations, United Nations agencies, philanthropists and even rock stars came together as partners to demand progress and pledge their best efforts to reach our goal of a world free of AIDS. In the Hall, participants at the high-level meeting pledged to show decisive, inclusive and accountable leadership. Their bold Political Declaration (resolution 65/277, annex) included clear targets — to stop new infections, stamp out discrimination and end AIDS-related deaths. Last year marked the thirtieth anniversary of the struggle against AIDS, but we were not looking back. We were looking towards a future where all people get the prevention and treatment services they need.

Over the past year, we have steadily intensified our efforts. Just last week, I helped to launch the integrated implementation framework to track commitments to the Millennium Development Goals (MDGs), including on HIV/AIDS. UN-Women recently joined the Joint United Nations Programme on HIV/AIDS (UNAIDS) to buttress our efforts to address how the virus impacts women and girls. When I launched my five-year Action Agenda, in January, I pledged to reach our goal of ending all paediatric HIV infections. Participants here have carried the AIDS response forward through dedication and hard work. I am here to ask them to do even more so that we can win the race.

Prevention is critical. We have to cut the number of new HIV infections by 1 million by 2015. We can only reach that goal if we reach out to people at risk — sex workers, men who have sex with men, people who inject drugs, women and youth.

Five million young people live with HIV. Each day, 3,000 more are infected. Yet, it is within our power to stop the spread of the disease. Young people are receptive to changing their behaviours. With the right information, they will do what is right for their health.

Last year's Political Declaration pledged treatment for 15 million people by 2015. That means doubling the number of people who now get treatment. We need to diagnose patients earlier, provide therapies more efficiently and develop better medicines. Women and children deserve special attention. Women need sexual and reproductive health services, and HIV-positive mothers must have antiretroviral drugs so their babies will be born HIV-free. Countries should support the

Global Plan towards the Elimination of New Infections among Children by 2015 and Keeping Their Mothers Alive. The Plan can quickly deliver the results we need for the Every Woman, Every Child initiative. Both are generating real commitments from Governments, health experts, activists, business executives and other partners.

During our high-level meeting last year, participants may have seen posters around the United Nations warning about an epidemic. Those dramatic posters said "Stigma Fuels HIV". The point was not to cause alarm; the point was to provoke change. I speak out against stigma every chance I get. Discrimination hampers our efforts to respond to the AIDS epidemic by making it difficult for people to seek prevention and treatment services. I am also urging all countries to end restrictions and penalties for people living with HIV. I am doing everything possible to make the United Nations a model workforce where there is absolutely no stigma at all. All of that work — ending stigma and discrimination, helping to address the special needs of women and youth, and reaching our targets for 2015 — requires funds.

However, international investment for AIDS dropped by 13 per cent from 2009 to 2010. Now that we are working towards 2015, we cannot slow down. All countries must do their part. We must strengthen the existing financial mechanisms, including the Global Fund, even as we search for new sources of sustainable financing. We must mobilize new funds and make the most of all our resources. That will help advance the goals of sustainable development. An AIDS-free generation is a generation that can help to end poverty. As we approach the Rio+20 United Nations Conference on Sustainable Development, let us pledge to make the struggle against AIDS an integral part of our campaign for the future we want.

The Acting President (*spoke in French*): I thank the Secretary-General for his statement.

Mr. Ntwaagae (Botswana): I have the honour and pleasure of delivering this statement on behalf of the African Group, Africa being the continent worst affected by the HIV/AIDS pandemic. We are here today to review the progress that has been made in implementing the Political Declaration on HIV and AIDS (resolution 65/277, annex) adopted at the High-level Meeting in June 2011 (see A/65/PV.95). We would first like to thank the Secretary-General for his detailed report on this agenda item (A/66/757), and also to note the insightful contributions and recommendations contained in the report.

The June 2011 Political Declaration on HIV/AIDS provides us with a road map towards achieving the key targets it contains, to which the international community has committed as part of its response to the HIV/AIDS pandemic. The Assembly will recall that those specific targets include reducing the number of new HIV/AIDS infections; eliminating discrimination; reducing HIV/AIDS-related deaths; reducing by 50 per cent new infections through sexual transmission and among injected drug users; substantially increasing funding; and meeting the needs of women and children, who are among the most vulnerable groups.

The Assembly will recall that in Abuja in 2006, African leaders declared 2010 as the year of universal access to HIV/AIDS prevention, treatment and care and to support services on the African continent. The adoption of that Declaration injected the necessary political impetus into the HIV/AIDS response throughout Africa. Since then, we have witnessed encouraging progress in the continent's HIV/AIDS response, with a drop of more than 25 per cent in new HIV/AIDS cases in at least 22 countries.

Although HIV/AIDS remains a challenge in Africa, particularly in the light of the global economic climate, it is encouraging that Africa continues to make significant progress in combating it. The rate of new infections has declined and stabilized in many African countries, with 22 reporting significant declines in the incidence of HIV/AIDS. AIDS deaths are declining as treatment programmes expand. The coverage of preventing mother-to-child transmission of HIV/AIDS across Africa has increased from 15 per cent in 2005 to 54 per cent in 2009.

Regrettably, however, the progress is extremely fragile, since the number of new infections continues to outpace the rate at which treatment programmes are being scaled up. It is also regrettable that only 37 per cent of people living with HIV/AIDS on the African continent have access to treatment. It is important to bear in mind that Africa is home to about 22.5 million people living with the disease, among them young people, women and girls. That particular group constitutes about 59 per cent of all people living with HIV/AIDS in Africa. Prevailing inequalities, including gender-based violence and socio-economic disparities, increase women and girls' risk of HIV/AIDS infection.

Moreover, the stigma and discrimination around HIV/AIDS continue to prevail in many countries.

As the Secretary-General's report acknowledges, a family-centred approach is more effective in advancing the linked goals of reducing new infections in children, optimizing health outcomes for women and children living with HIV/AIDS, reducing the number of children orphaned by HIV/AIDS and minimizing poverty among HIV-affected households. In that regard, the African Group reaffirms the central role of the family, while taking into account the various cultural, religious and ethical factors involved, in reducing the vulnerability of children and young people and ensuring the access of both boys and girls to primary and secondary education, including HIV and AIDS in curriculums for adolescents; ensuring safe and secure environments, especially for young girls; expanding good-quality, youth-friendly information on sexual health education and counselling services; and strengthening sexual and reproductive health programmes.

Furthermore, there is still a serious shortfall in resources for HIV/AIDS response in Africa. The result, as I indicated earlier, is that about two thirds of those who require antiretroviral treatment are unable to access it. In that regard, the African Group expresses its deep concern that the funding devoted to HIV/AIDS responses is still not commensurate with the magnitude of the epidemic. The ongoing global financial and economic crisis continues to have a negative impact on HIV and AIDS response at all levels. We therefore welcome the increased resources that are being made available as a result of the establishment by many developed countries of timetables for achieving the target of 0.07 per cent of gross national product for official development assistance by 2015. We also stress the importance of complementary, innovative sources of financing in addition to traditional funding, including official development assistance for supporting national strategies, financing plans and multilateral efforts aimed at combating HIV and AIDS.

The African Group further reaffirms the vital importance of guaranteeing access to affordable treatment, vaccines, medicines, traditional medicine and indigenous knowledge, and then of prioritizing the search for solutions that can make possible, through a specific industry licence, the production of HIV/AIDS medicines so as to generate companies in the developing world, through intensified effort on the part of the World Health Organization, the World Trade Organization and World Intellectual Property Organization aimed at ensuring that issues of intellectual property rights do not hinder access to affordable medicines.

The African Group urges developed countries to support the strengthening of health systems in developing countries by implementing the World Health Organization's Global Code of Practice on the International Recruitment of Health Personnel.

A chronic shortage of health workers in developing countries hampers efforts to combat HIV/AIDS.

In conclusion, the African Group reaffirms its commitment to the goal of eliminating new HIV/AIDS infections among children and keeping their mothers alive. Let us intensify efforts to reach out to all women and children at risk of HIV/AIDS with the services that they need. There is clear continental and international political will and commitment to achieving universal access and the health-related Millennium Development Goals by the year 2015. Together, and in solidarity, leaders of the African continent, professionals, the private sector, civil society, people living with HIV/AIDS, young and old can all work together to stop new infections, which continue to outpace the number of people starting treatment in the African continent.

Mr. Mac-Donald (Suriname): I have the honour to speak on behalf of the 14 member States of the Caribbean Community (CARICOM) at this plenary meeting to review the implementation of the Declaration of Commitment on HIV/AIDS (resolution S-26/2) and the Political Declaration on HIV/AIDS (resolution 65/277, annex). I would like to use this opportunity to thank Secretary-General Ban Ki-moon for introducing the report contained in document A/66/757.

In June 2011, at the United Nations high-level meeting on HIV/AIDS, the international community met to reaffirm our commitment to ending the HIV/AIDS epidemic. We pledged to place increased focus on populations at high risk and build shared responsibility among Governments, the private sector and non-governmental organizations for achieving the targets. We further committed to redoubling efforts to achieve universal access to prevention, treatment, care and support by, among other things, eliminating inequalities and gender-based violence, especially against women and adolescent girls.

For the past 11 years, the region's response to HIV/AIDS has been articulated through the Pan-Caribbean

Partnership against HIV/AIDS (PANCAP). In collaboration with the Joint United Nations Programme on HIV/AIDS (UNAIDS) regional support team and other partners, PANCAP supports the efforts of Caribbean members to achieve the targets of the Declaration of Commitment on HIV/AIDS and the Political Declarations on HIV/AIDS.

PANCAP remains an international best practice, as the Caribbean region is the only region of the world where a governance mechanism is in place to leverage the engagement of Governments, regional civil society, including people living with HIV and vulnerable communities, United Nations partners such as UNAIDS and the Pan American Health Organization (PAHO) and international development partners.

At the eleventh PANCAP annual general meeting, held in the Bahamas in 2011, CARICOM countries and other regional States and partners reaffirmed the region's commitment to the 2010 PANCAP declaration, which identified the major targets to be achieved by the Caribbean by 2015. Those targets coincide with the Political Declaration on HIV and AIDS and include eliminating new infections among children, increasing access to care and treatment by 80 per cent, reducing new infections by 50 per cent and accelerating the programme of human rights for people living with HIV, including the elimination of travel restrictions.

The Caribbean has also led efforts to ensure that HIV and AIDS are retained as a key issue on the post-2015 development agenda. Women and girls continue to be disproportionately affected by the epidemic, which has a significant impact on social and economic development.

CARICOM countries took the lead to raise awareness of the impact of non-communicable diseases on development and, over the past year, began to identify the policy and programmatic nexus between HIV and chronic non-communicable diseases in order to increase the efficiency of resources allocated and to obtain greater results. We have learned that to address diseases such as HIV, we must systematically address the underlying causes of risks and vulnerability. Those include issues of gender equality, poverty, inequity and social inclusion. There is regional consensus on the need to focus on vulnerable groups and to meaningfully engage civil society to reach hard-to-reach communities.

HIV has also brought to the fore discussions on ownership and accountability and has changed the region's approach to the participation of affected populations in the response. Cognizant of commitments to achieving the Political Declarations, the UNAIDS regional support team and the PANCAP Coordinating Unit are working with countries to establish a new generation of strategic plans for HIV that recognize the role of poverty, inequality and social exclusion in creating the risk environment for ill health and HIV. Achieving shared responsibility for outcomes across the public, private and community sectors is a key strategy.

The Caribbean is aiming to be the first region in the world to eliminate the mother-to-child transmission of HIV. The PAHO technical working group on mother-to-child transmission and congenital syphilis in the Caribbean is responsible for providing the necessary guidelines and, where necessary, technical assistance to countries.

The PANCAP Coordinating Unit of the CARICOM secretariat has been working with implementing partners such as the University of the West Indies, the Caribbean Health Research Council, the Caribbean Vulnerable Communities Coalition, the Caribbean HIV&AIDS Alliance and the Caribbean Regional Network of People Living with HIV on a series of programmes designed to assist Caribbean countries in building capacity to achieve the targets. Those include providing support for the training of workers, building the capacity of vulnerable communities and community organizations, the implementation of a number of regional model policies and professional guidelines such as the Regional Model Condom Policy and codes of practice for medical and psychosocial practitioners.

In the current global economic context, the Caribbean region is carefully examining the options for ensuring the sustainability of the HIV response, given the increasingly limited access to external resources and limited fiscal space in most countries.

PANCAP is developing an electronic map of resources allocated by countries and external partners to the HIV response to better inform national and regional priority-setting. We intend to continue working within the Global Fund and other international bodies to overcome excessive eligibility constraints and to access funding for targeted populations.

As a region, accelerating the human rights agenda around HIV remains a priority. The UNAIDS regional support team is supporting countries through its establishment of the coalition for social justice and an operative legal aid system established to

support vulnerable populations seeking legal redress. With support from the Global Fund to Fight AIDS, Tuberculosis and Malaria, the PANCAP Coordinating Unit is working with regional countries to implement an anti-discrimination legislative agenda.

Model antidiscrimination legislation has been considered by CARICOM ministers of health, chief parliamentary counsels and will soon be examined by CARICOM attorneys-general. Together with the United Nations Special Envoy for HIV/AIDS in the Caribbean, Dr. Edward Greene, and the UNAIDS regional support team, CARICOM countries have started a series of national consultations focused on an accelerated agenda for human rights to reduce stigma and discrimination. CARICOM member States will continue to take the necessary steps to create synergies at the country and the regional levels to achieve our targets on HIV and AIDS. In addition to seeking to advance South-South cooperation, we look forward to continued collaboration with our development partners to that end.

Mr. Sea (Cambodia): In Cambodia's capacity as Chair, I have the honour to deliver this statement on behalf of the 10 member States of the Association of Southeast Asian Nations (ASEAN), which consists of Brunei Darussalam, Cambodia, Indonesia, the Lao People's Democratic Republic, Malaysia, Myanmar, the Philippines, Singapore, Thailand and Viet Nam on the implementation of the 2001 Declaration of Commitment (resolution S-26/2) and the 2006 Political Declaration on HIV/AIDS (resolution 60/262, annex).

We at ASEAN express our warmest appreciation to the President for convening this meeting, and to the Secretary-General for his report (A/66/757) on the implementation of the Declaration of the Commitment on HIV/AIDS and the Political Declarations on HIV/AIDS. We also strongly support the calls for the Members States of the United Nations, made by Non-Aligned Movement (NAM) ministers during the meeting held in Egypt in May, to significantly scale up their efforts towards the goals of universal access to comprehensive prevention programmes, treatment, care and support and towards halting and reversing the spread of the HIV/AIDS pandemic by 2015.

Recognizing that health is a fundamental right of our people, ASEAN is united in our efforts to reduce and eliminate the transmission of communicable diseases in South-East Asia, including HIV/AIDS. ASEAN is steadfast in its commitment to achieving Millennium Development Goal (MDG) 6, which specifically addresses HIV/AIDS.

Since the initial adoption of the Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS, ASEAN leaders have also remained steadfast in our commitment to halt and reverse the spread of new infections. During the nineteenth ASEAN Summit, held in Bali, Indonesia, in 2011, member States adopted the ASEAN Declaration of Commitment: Getting to Zero New HIV Infections, Zero Discrimination, Zero AIDS-Related Deaths, which seeks by 2015 to reduce the transmission of HIV by 50 per cent, eliminate new HIV infections among children and scale up antiretroviral treatment, care and support to 80 per cent coverage of people living with HIV.

The ASEAN Task Force on AIDS, established in 1993, met in Bangkok last year under the theme "Getting to zero in ASEAN: responses, gaps, challenges and ways forward". According to the Task Force's first ASEAN regional report on HIV, over 1.5 million people are estimated to be living with HIV in the ASEAN region. As a result of a coordinated regional response and international assistance, including initiatives to support member States in reaching key affected populations for treatment and prevention, prevalence rates have decreased overall in South-East Asia and many countries in the ASEAN region have reached their targets in treatment coverage. Members of ASEAN have been global leaders in their response to HIV: Thailand and Malaysia, for example, were cited as global superstars in preventing the mother-to-child transmission of HIV. Furthermore, in September 2010, Cambodia received the United Nations MDG 6 award for its outstanding national leadership, commitment and progress towards combating HIV/AIDS.

However, in spite of tremendous progress since 2001, two member States have experienced an increase of new infections — over 25 per cent — and prevalence rates among key populations, such as sex workers and their clients, remain high. Moreover, most member States continue to depend on international assistance in controlling and reversing the epidemic. Because of that, the ASEAN Task Force supports the fast-tracking of accreditation for licensing in ASEAN member States to produce affordable generic antiretroviral drugs.

Currently, ASEAN members are movi g towards building an ASEAN community by 2015. One of

the key pillars in that undertaking is the ASEAN Socio-Cultural Community Blueprint, which lists the elimination of HIV is one of its priorities. We recognize that the HIV epidemic threatens the realization of that effort, with profound socio-economic consequences. As such, ASEAN strongly welcomes the first report of the General Assembly since the High-level Meeting on HIV/AIDS, which reviews progress made during the previous decade. We understand that effective responses must deliver focused, evidence-informed interventions that specifically address the unique needs of at-risk populations.

In order to achieve the vision of a world with zero new HIV infections, zero discrimination and zero AIDS-related deaths, ASEAN seeks more concrete and closer ties with multilateral, bilateral and other international organizations that involve all stakeholders in implementing comprehensive responses. Those dialogues and partnerships need to be pursued strategically with energy, vigour and passion. In doing so, we can move closer to achieving the vision of the interrelated zero objectives, as outlined in the report of the Secretary-General.

While tremendous progress has been made in halting and reversing HIV/AIDS, much work remains to be done. The elimination of HIV/AIDS in our respective societies is one of the great undertakings aimed at the well-being of our people. Given the nature of epidemics, we cannot achieve zero AIDS-related deaths without a strong political commitment on the part of the individual Governments of ASEAN, with cooperation, coordination and technical and financial assistance from the international community and all States Members of the United Nations.

Mr. Gaspar Martins (Angola): It is an honour and a privilege, as Chair of the Southern African Development Community (SADC), to share with the Assembly information on the regional status of HIV/AIDS, current interventions and challenges impeding our efforts to intensify our response.

SADC aligns itself with the statement delivered by the representative of Botswana on behalf of the African Group.

Significant gains have been made in the HIV/AIDS response over the past decade in our region. Many countries in the SADC region have during the past 12 months achieved the expansion of access to antiretroviral therapy and prevention of mother-to-child transmission. Significant declines have also been recorded in AIDS-related deaths, HIV prevalence among young pregnant women, as well as declines in the rate of sexual transmission of HIV and new infections in children.

The achievement of the target as agreed in the 2011 Political Declaration on HIV/AIDS (resolution 65/277, annex) is vital for the future global health and well-being of our people. However, with less than four years remaining before the target year, we are concerned that the current response is unlikely to result in the 2015 targets being reached.

Southern Africa is still grappling with the challenges of HIV/AIDS. The region has 4 per cent of the global population but accounts for 36 per cent of the global burden of HIV/AIDS, making it the most affected by this epidemic. The impact of the HIV/AIDS epidemic has undermined the potential of southern Africa to achieve the Millennium Development Goals (MDGs) by 2015, as halting the spread of HIV/AIDS is not only an MDG in and of itself but also a prerequisite for reaching other MDGs.

Despite the continued efforts and commitments by Governments of the region to address HIV/AIDS in order to make a difference in the lives of our people, the region is faced with other challenges, including overburdened health-care systems, especially in terms of infrastructure and human resources capacities; underdevelopment and poverty, especially now, in the context of the rising food and oil prices, as well as the effect of climate change; inadequate monitoring and evaluation systems, as well as research capacity and ownership; the limited alignment and harmonization of HIV/AIDS resources, and the unaffordable prices of medicines, especially antiretroviral drugs.

Aware of those challenges, SADC has resolved to jointly mobilize our capacities and resources to fight the epidemic by utilizing our comparative advantage of being a regional institution, best practices and experiences continue to be shared among SADC member States in the areas of nutrition, voluntary counseling and testing, prevention of mother-to-child transmission, and mainstreaming gender and human rights in HIV/AIDS programmes.

SADC's drive to develop a harmonized HIV/AIDS policy and institutional mechanism is built upon existing and proven country-level best practices. In addition, SADC national AIDS councils and commissions remain major actors in the coordination of the response plans.

As we strive to meet the commitments we made towards reaching universal access to HIV/AIDS prevention, treatment, care and support, we acknowledge the reality of the diminishing external resources to fund the global HIV/AIDS response. Declines in global spending underscore the need to redouble efforts to mobilize much-needed resources to achieve the targets.

In that regard, we wish to stress the need for continued technical assistance and sustainable financial options for an HIV/AIDS response. SADC recognizes the need to explore the potential of new and existing partnerships with various developed partners and financing institutions as well as our shared responsibility in that regard. We recognize also that enhancing our efforts to integrate HIV/AIDS into broader health and development plans is critical for leveraging resources to achieve the targets.

Our region advocates a holistic response that includes taking all measures to reduce new HIV infections. We call for the engagement of men and boys in scaling up voluntary counselling and testing, antiretroviral treatment, male circumcision and comprehensive prevention of mother-to-child transmission to achieve the virtual elimination of mother-to-child transmission.

We support the scaling up of periodic treatment and care and the taking of all measures necessary to keep mothers alive while removing HIV-related stigma and discrimination and ensuring high-impact, cost-effective, sustainable and accountable responsive instruments for HIV in particular and in the health field in general.

We want to make sure that every girl and boy has correct knowledge about HIV/AIDS as well as the skills to enable them to protect themselves from HIV. We also want to ensure that all pregnant women in the region have access to services aimed at the prevention of mother-to-child transmission that are integrated into antenatal care, thus ensuring that all men, women and children in our countries who need treatment can get it as close as possible to where they live. Furthermore, we are striving to provide support through home care or other means, in collaboration with non-governmental organizations and faith-based organizations, as follow-up to our patients and to guarantee that all children and families made vulnerable by HIV/AIDS have access to all social services, care and support, including psychological and nutritional support.

In conclusion, on behalf of the States members of SADC, I wish to take this opportunity to extend our sincere appreciation to all our development partners for providing technical and financial support to fight this scourge. The adverse impact of the ongoing financial and economic crisis, the continuing food insecurity, the energy crisis and the challenges posed to developing countries by climate change continue to prevent the achievements of recent years from being sustainable.

In that regard, we hope that, as partners, we will continue to work together for our mutual benefit in addressing those millennium challenges. We are committed to the global effort in that area, and we are aware of the many challenges that lie ahead. Together with our partners, we are committed to doing everything possible to achieve universal access and to eliminate new infections.

In that regard, SADC renews its commitment to the full implementation of the 2011 Political Declaration on HIV and AIDS.

Mr. Bula'nek (European Union): I am speaking on behalf of the European Union (EU) and its member States. The acceding country Croatia, the candidate countries Turkey, the former Yugoslav Republic of Macedonia, Montenegro, Iceland and Serbia, the countries of the Stabilization and Association Process and potential candidates Albania and Bosnia and Herzegovina, as well as Ukraine and Georgia align themselves with this statement.

The High-level meeting on AIDS in June last year (see A/65/PV.95) provided an important opportunity to reaffirm our political commitment and to address such issues. However, HIV and AIDS continue to pose a threat to development and to the well-being of individuals. It is only by involving and by educating young women and men, girls and boys, as well as adults, about sexual health that we can successfully combat HIV and AIDS. We welcome the excellent report of the Secretary-General (A/66/757) on progress towards achieving the targets of the 2011 Political Declaration on HIV and AIDS (resolution 65/277, annex), including the recommendations contained therein.

The report demonstrates that there has been significant progress, but also that much remains to be done. Most important, we need an evidence-informed response in terms of increasing and improving prevention efforts; improving access to treatment, care and support services; the removal of laws and policies to achieve effective and rights-based AIDS responses; the allocation of adequate resources; and comprehensive

protection for vulnerable people. The European Union remains committed to ending HIV-related stigma and discrimination, including those affecting key populations, such as injecting drug users, men who have sex with men and sex workers.

The leadership of the United Nations and its membership is essential. We would again like to acknowledge the usefulness of the report and the importance of the Joint United Nations Programme on HIV/AIDS to us. We are particularly pleased that UN-Women has now joined as the eleventh sponsor.

Although the global HIV incidence has declined, there is no room for complacency, as the number of people who become infected remains on the rise in Eastern Europe, Central Asia, North Africa, the Middle East and parts of Asia. Globally, the number of new infections still outpaces the number of new patients under treatment. The HIV/AIDS epidemic remains a global challenge, which calls for continued global attention and a sustained and long-term response.

The European Union helps by strengthening cooperation among national authorities, civil society and stakeholders across Europe. EU policies involve providing political support to authorities and stakeholders in the EU and in neighbouring countries so as to improve access to prevention, treatment, care and support, to reach migrants from countries with a high prevalence of HIV, and to improve policies targeting populations most at risk.

Most new HIV infections are spread through unsafe sex. In the context of HIV and AIDS, there is therefore a need to further integrate sexual and reproductive health and rights into policies and programmes at the local, regional and international levels and to address the drivers of the HIV epidemic. Comprehensive sex education in and outside school, access to youth-friendly information and health-care services, access to affordable and high-quality male and female condoms and other forms of prevention and contraceptives, and an increase in services to sexual partners must be part of our response to fight HIV and AIDS.

It is especially important that men and boys are informed and educated about their roles and responsibilities. In that regard, we welcome the work on youth and adolescents undertaken by the United Nations, most recently by the Commission on Population and Development. We look forward to further addressing the challenges of combating HIV and AIDS and to implementing the 2011 Political Declaration and the recommendations of the Secretary-General's report in close cooperation with Member States, United Nations agencies and other stakeholders.

Let me end by raising a general concern. The HIV response has always been a great joint effort of the world community, marked by high-level political commitment. We should all do our best to continue that joint effort, and should focus on evidence-based effective measures, although it may sometimes be challenging to adapt them to national realities. Open dialogue is key to reversing the trend of the increasing number of new HIV infections observed in some regions of the world.

Mr. Mashabane (South Africa): We align ourselves with the statements delivered on behalf of the African Group and the Southern African Development Community.

My delegation wishes to thank the Secretary-General for his informative report entitled "United to end AIDS: achieving the targets of the 2011 Political Declaration" (A/66/757). AIDS remains one of the major challenges facing our countries, sub-Saharan Africa being most heavily affected. South Africa is among the 22 priority countries identified in the Global Plan. We appreciate the assistance and the support that we receive in that regard. It is our view that HIV is linked to the development agenda, and we urge the international community to support national programmes that focus on poverty eradication and improve economic growth. The fight against HIV and AIDS can benefit from the progress made in the achievement of the Millennium Development Goals.

No single country can be successful in the fight against the epidemic. Therefore, partnership becomes critical. Africa has revitalized the AIDS Watch Africa initiative, a continent-wide network dedicated to the fight against the epidemic.

Much progress has been made by the world in the fight against AIDS, but it is unlikely that we will be able to achieve our goals by 2015. We need to redouble our efforts in order to improve and promote universal access to HIV prevention, treatment, care and support for those who need them.

Financial resources remain a challenge, as we have observed that HIV funding has decreased since 2010, with only $15 billion being available for the HIV response in 2010, as against the target of reaching

$24 billion in HIV investment by 2015.We are grateful to the Global Fund to Fight AIDS, Tuberculosis and Malaria and to the United States President's Emergency Plan for AIDS Relief for their continued support.

Access to HIV drugs is another challenge, as costs are very high. Perhaps we need to consider investing in local manufacturing of generic drugs to reduce costs. More efforts need to be undertaken in areas such as greater involvement of people living with AIDS; gender inequality and the empowerment of women and girls, especially in exercising their reproductive rights; access to quality education; gender-based violence; and the promotion and protection of the human rights of populations at higher risk who still face stigma and discrimination based on their sexual orientation and gender identity. As a result of such stigma and discrimination, populations at higher risk face exclusion from national economic, health and social support programmes. Research must continue to develop new, safe and cost-effective methods to reduce women's vulnerability to HIV transmission, including female condoms. We have observed that certain countries continue to impose travel restrictions on people living with HIV and we believe that such actions are discriminatory and need to be reviewed.

South Africa's response to HIV/AIDS is based on strengthening health systems, including primary health-care approaches. We have also integrated HIV programmes with other health services, including women's and children's health, tuberculosis and non-communicable diseases. We have shifted the way we think about the response to the epidemic and have recognized the need to expand beyond the health sector and include all sectors — every department, all institutions, all organized structures, communities, households and individuals.

We have unveiled a new national strategic plan on HIV, AIDS and tuberculosis for the period 2012-2016. For the first time in our history, we have integrated HIV, AIDS and tuberculosis in the same strategic plan. The new plan outlines a 20-year vision for the country in the fight against the double scourges of HIV/AIDS and tuberculosis.

To deal with the prevention of mother-to-child transmission and keep mothers alive, we ensure that pregnant women and their newborns have access to treatment that reduces the risk of HIV transmission during pregnancy and delivery. As a result, by the end of 2011, the transmission of HIV from mothers to children had declined significantly.

In April 2010, the President of the Republic launched a voluntary testing and counselling campaign as an important element for people to know their status in order to ensure early access to treatment and care. As a result, since the campaign started, a considerable number of new people are receiving treatment.

In South Africa, people living with HIV/AIDS whose CD4 cell count is 350 or less are eligible to access antiretroviral treatment with immediate effect as a way of saving lives lost to HIV/AIDS.

In conclusion, the vision of an AIDS-free world can only be realized if we intensify our efforts for an effective and more sustainable AIDS response.

Mr. Quinlan (Australia): Twelve months ago, I had the honour to work with my colleague Ambassador Ntwaagae of Botswana in co-facilitating the adoption of the 2011 Political Declaration on HIV and AIDS (resolution 65/277, annex). The Declaration, as we know, is bold and ambitious. It reflects a commitment by political leaders to a world where those with HIV are treated with dignity and respect, where those who are at risk of HIV are given support and resources to prevent infection, where those living with HIV can lead full and productive lives, where there is universal access to antiretroviral treatment, where the mother-to-child transmission of HIV has been eliminated, and where groundbreaking scientific advances in HIV prevention and treatment are leveraged to reduce new infections and HIV-related illness and death.

The Political Declaration moves us firmly in the direction of an AIDS-free world. The targets that we adopted by in the General Assembly offer for the first time quantified, achievable targets — targets based on current realities. But the fact is that, without an immediate change in the way we work, those targets risk becoming yet another set of targets that we fail to reach. As the report of the Secretary-General notes (A/66/757), we are not on track to achieve any of those targets, and each target missed means more deaths — more deaths every day.

During the three hours that we meet this morning, over 900 people will be newly infected with HIV, and over 600 will have died. During the three hours that we meet this morning, almost 1,000 people will be newly

infected, and over 600 of them will have died. The rate of infection still outpaces the access to treatment.

We need courage to change our approach to HIV prevention and treatment. We need courage to stop doing things for which there is little or no evidence of effectiveness. I am frankly alarmed to find that very few countries have started the process of formally and fully incorporating the commitments, targets, actions and timelines of the Political Declaration into their national HIV strategies and financing plans. My own country needs to do much better. Yet, the Declaration promises that Member States will complete that process by the end of 2012. Without urgent action, we place at risk the historic opportunity we have to turn the tide of the HIV epidemic. We encourage the Joint United Nations Programme on HIV/AIDS (UNAIDS) to take additional measures to assist countries to fully incorporate the Declaration's elements into their national HIV plans by mid-2013 at the latest.

We must, as the evidence tells us, take an investment approach to the HIV response — investments that are informed by data analysis and aligned to where they will directly benefit HIV outcomes. We must eliminate wastage on ineffective programming and governance architecture. An investment approach must be based on a solid, realistic results framework — using the Political Declaration targets as the foundation — where results are identified and investments funded, not simply aspired to.

We commend the leadership of UNAIDS and Kenya in developing a new investment framework — a tool to promote efficiency and maximize results for the HIV response. The new framework should bring us savings that allow us to reassess the current funding shortfall, but the fact is that the estimated shortfall will still remain immense. As the Secretary-General notes in 2010, we experienced the first ever decline in HIV funding. Reaching the targets in the Political Declaration will require a roughly 50 per cent increase over current outlays.

Australia encourages countries to recognize HIV prevention and treatment services as their core responsibility and allocate their budgets accordingly, especially for populations at higher risk. As the Declaration notes, the higher risk populations are men who have sex with men, people who inject drugs, sex workers and women and young people. All partners in the response need to align to the new investment approach and support countries in using their resources more effectively. That includes the Global Fund to Fight AIDS, Tuberculosis and Malaria as the biggest partner for the HIV response.

Countries need guidance and tools to make the changes needed in their specific context. They need to understand when and how to integrate the HIV response and what that means in concentrated, generalized or low-level epidemics. Recent scientific advances, including new clinical guidelines, offer powerful approaches to HIV prevention, care and treatment. That must give us the confidence to scale up prevention and treatment programmes and to lower the cost of medications. We must also support the enabling environment so vital to the response, including through legal, social and economic frameworks. A human rights-based approach to the HIV response is a necessity. Punitive laws against people living with or at risk of HIV must be repealed. That is fundamental to HIV prevention.

We need political resolve to follow through on the commitments of the Political Declaration. We need to reignite the leadership that we ourselves, the Member States, demonstrated here a year ago. The special event on the Millennium Development Goals to be held in 2013 will be one opportunity to review progress in and lessons of the HIV response. We must work much harder between now and then to deliver a good story. We must also ensure that the HIV response receives the attention it needs in the development of a post-2015 development agenda.

In conclusion, I would like to thank UNAIDS above all, as well as agencies supporting the implementation of this landmark Declaration and mainstreaming the HIV response across programmes. We must all get behind them. My own country is attempting to do so, including through multi-year core funding to UNAIDS. For the first time since this epidemic exploded over us, we do have the ability to beat it. But we will not without far more effective efforts to reach the targets we ourselves have set. My country re-endorses those targets today. We endorse the Secretary-General's recommendations in his report, and we support the draft decision (A/66/L.49) presented for adoption by the General Assembly.

Mr. Rishchynski (Canada): Canada welcomes this opportunity to speak about the progress made towards the commitment to the 2011 Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate

HIV and AIDS (resolution 65/277, annex). In our current global environment, it is important to renew our sense of shared responsibility and ensure that the principles of national ownership, mutual accountability and sustainability underpin future global responses.

(*spoke in French*)

The Government of Canada is an active player in global efforts to address HIV and AIDS through investments in prevention, treatment, care and support and a commitment to maternal, newborn and child health and to strengthening health systems. The elimination of vertical HIV transmission from mothers to children is an important component of our global health efforts. We applaud the global community's commitment to intensify efforts focused on children through the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive.

(*spoke in English*)

Canada's domestic response has made significant progress in addressing the specific needs of populations disproportionately affected by HIV and AIDS. The Government of Canada's domestic investment will consist of more than $93 million in HIV-focused initiatives for research, laboratory science, surveillance, vaccine development, public awareness, prevention and facilitation of access to care, treatment and support. The Government of Canada recognizes the important role of community partners in reaching people most at risk and in preventing the spread of HIV and AIDS. We also seek to actively engage communities during all stages of research and programme initiatives.

To achieve the new targets set out in the Declaration, Canada will continue to invest in policies and programmes that are effective in meeting the needs of people affected by HIV and AIDS, to sustain efforts to address the broader health inequities and determinants of health, as well as co-infections, including tuberculosis, viral hepatitis and sexually transmitted infections that affect vulnerability and resiliency vis-à-vis HIV. I assure the Assembly that Canada remains fully committed to preventing HIV transmission, supporting those affected by or at risk of HIV and AIDS and eliminating this devastating disease, at home and globally.

Ms. Lucas (Luxembourg) (*spoke in French*): Luxembourg associates itself fully with the statement made on behalf of the European Union.

We welcome today's debate, which gives us the opportunity to assess the implementation of the Political Declaration on HIV and AIDS unanimously adopted last year by the General Assembly (resolution 65/277, annex). Through the Declaration, we committed to achieving 10 goals by 2015, and in particular to reducing sexual transmission of the virus by 50 per cent; eliminating new infections in children and substantially reducing AIDS-related maternal deaths; providing antiretroviral treatment to 15 million people living with HIV; and eliminating the stigma and discrimination against people living with HIV by promoting laws and policies that encourage human rights and fundamental freedoms.

Together with the Joint United Nations Programme on HIV and AIDS and its Executive Director, we are committed to the strategic plan for the period 2011-2015 for the three zeroes: zero new infections, zero discrimination and zero AIDS-related deaths. We believe that plan responds to current needs in the fight against HIV/AIDS by homing in on the salient aspects of that fight. While we certainly appreciate that HIV services are now more integrated into the strengthening of health systems in general, we are still convinced that the fight against this epidemic should not be limited to aspects of public health alone. It also involves a choice on the part of society that takes into account such important aspects as respect for and promotion of human rights and fundamental freedoms. The fight against HIV/AIDS has become an exemplary struggle that is the responsibility of all humankind, a genuine shared responsibility. As such, it has become an inspiration for addressing many other challenges we face.

We thank the Secretary-General for his very comprehensive report (A/66/757) and for the relevant analysis developed in it. If the battle is not yet won, there is nonetheless hope, because for the first time, new infections are declining. As the Secretary-General states in the summary to his report: "After more than three decades of struggle, success is finally in sight." But at this crucial moment, when victory is within reach, we must absolutely not let up. Where financing is concerned, rather than increasing annual resources to the level required, between $22 billion and $24 billion, last year we saw a decrease of 13 per cent. That is not a good sign, considering that we have only four years left to reach our goals. Traditional donors cannot fill that gap alone; we must find other ways. Besides increasing the amount of funding, there are also ways to use existing

resources more efficiently and to target them better, particularly by improving access to services for the most vulnerable groups. Finally, it is also helpful to seek synergies with programmes aimed at other objectives, including the Millennium Development Goals in the area of health.

We should also address the gaps that persist in policies and access to care services, particularly for those in vulnerable groups, such as men who have sex with men, intravenous drug users and sex workers of both genders. Punitive laws, gender inequality, violence against women and other violations of human rights are continuing obstacles to effective national responses. Such responses should be evidence-based and free of taboos, or we will not achieve the desired results.

Luxembourg has long been committed to the fight against HIV/AIDS. It is a priority for us at the national level as well as in the context of our policy of cooperation in development. Our official development assistance (ODA) reached 0.7 per cent of gross national income (GNI) in 2000. Since 2009, Luxembourg's ODA has crossed the threshold of 1 per cent of GNI. In that context, we have invested considerable resources in the fight against HIV/AIDS. Since 2005, Luxembourg has contributed more than €35 million to UNAIDS. In 2011, Luxembourg became the ninth largest overall contributor to UNAIDS. Luxembourg's voluntary contribution amounts annually to €2.65 million, to which we also contribute €2 million to two thematic UNAIDS programmes, namely, the Three Ones and the Global Coalition on Women and AIDS. While the first programme is part of United Nations reform in the context of the Delivering as One initiative, the second programme responds to a disturbing trend of the epidemic and aims to reduce AIDS-related maternal mortality.

Today more than ever, Luxembourg believes that the time is ripe and that we can make substantial progress. It is in that spirit that, on 22 May in Geneva, Luxembourg signed a strategic partnership agreement with UNAIDS for the period 2012-2015. That multi-year agreement, which guarantees funding at a level at least equal to that of previous years, gives UNAIDS greater predictability and greater flexibility in the use of funds.

I assure the Assembly that Luxembourg will continue to work tirelessly to reach the goals we have collectively set for ourselves for 2015.

Mrs. DiCarlo (United States of America): Thirty years into the AIDS epidemic and 10 years after the landmark special session of the General Assembly on HIV/AIDS, we came together last June at the High-level Meeting and agreed on a bold new goal of treating 15 million people by the year 2015.

The United States is committed to achieving the targets set out in the Political Declaration on HIV and AIDS (resolution 65/277, annex). On World AIDS Day, President Obama set a new target for the United States of supporting treatment for 6 million people by the end of 2013. He also announced that the United States planned to reach over 1.5 million more HIV-positive pregnant women with medicine to prevent transmission to their children by 2013.

Despite a challenging budget environment, the United States continues to make this work our priority and currently provides a majority of all donor Government resources for the response to HIV/AIDS. To preserve the progress that we have made to date and to meet our 2015 targets, however, it is critical that other donors step up and do more to ensure a sustained, innovative and funded response to this disease.

The Global Fund remains an essential vehicle in the fight against HIV/AIDS, tuberculosis and malaria. We have pledged to seek congressional appropriations in support of the total contribution of $4 billion to the Fund. We also welcome the pledges of support that have been made by others, including Germany, Japan, Saudi Arabia and the Bill and Melinda Gates Foundation.

In addition to increased funding, meeting the targets set out in the Political Declaration will also depend upon finding efficiencies and increasing the impact of all of our programmes. In 2004, the cost to the President's Emergency Plan for AIDS Relief for providing antiretroviral vaccines and services to one patient averaged nearly $1,100 a year. Today, it is $335 and falling. The United States is committed to strategic investment in high-impact interventions and informed country ownership and decision-making on investment options.

As a global community, we have developed an effective set of tools to put us on the road to an AIDS-free generation. We know that by employing a combination prevention approach, which includes preventing mother-to-child transmission, expanding voluntary medical male circumcision and scaling up treatment for people living with HIV/AIDS, we can

change the trajectory of this disease. We must continue to learn and evolve, embracing new scientific findings and translating those findings into evidence-based interventions.

Achieving our ambitious global goals will require a shared responsibility involving Governments, the private sector, non-governmental organizations, faith-based organizations and, critically, people living with and affected by HIV. Together, we must address in a coordinated manner the barriers that still impede progress. There cannot be an effective public health response to HIV/AIDS if we do not give due attention to key populations, including women, racial and religious minorities or the lesbian, gay, bisexual and transgender community.

The remarkable achievements of the past 12 months give us great reason for optimism about the next phase of this fight. We can only realize the shared vision laid out in the Political Declaration if we further strengthen our collective efforts. The United States looks forward to working with other Member States and partners to meet the major challenges still ahead of us.

Mrs. Dunlop (Brazil): I wish to thank the President of the General Assembly for convening this very important meeting on agenda item 10 on the implementation of the Declaration of Commitment on HIV/AIDS (resolution S-26/2) and the Political Declaration on HIV/AIDS (resolution 65/277, annex).

I would also like to seize this opportunity to express our gratitude to the Secretary-General for presenting the report contained in document A/66/757, as well as to commend the Joint United Nations Programme on HIV/AIDS (UNAIDS) and its sponsors for the encouraging results recently achieved in the efforts towards achieving the vision of a world with zero new HIV infections, zero AIDS-related deaths and zero discrimination.

This meeting is the first to be held after the adoption of last year's Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS. The international initiative that culminated in the adoptions of the Declaration of Commitment and the Political Declaration, respectively 11 and six years ago, constitutes an excellent example of how the constructive engagement of Governments, civil society and other stakeholders can contribute decisively to facing serious global challenges.

The 2011 Political Declaration builds on commitments previously agreed, particularly on the goal to provide universal access to HIV prevention, treatment, care and support, and establishes a set of key targets for 2015, paving the way towards eliminating HIV infections and AIDS-related deaths.

We meet here today not only to assess progress achieved in the implementation of those landmark documents but, most important, to evaluate how our national and collective actions have had an impact on the lives of our peoples and reduced the prevalence and incidence of the disease and the dire consequences for those who live with or are infected with or affected by HIV.

The targets we set for ourselves may be ambitious, but the Secretary-General's report indicates that there are reasons to believe they may be achieved. Substantive reductions have recently been registered in the sexual transmission of HIV, especially in high prevalence countries. However, there is a lot we must accomplish in order to reach the 50 per cent reduction target by 2015.

Comprehensive education on human sexuality must be made available, along with an expansion of access to essential preventive commodities, particularly male and female condoms.

Countries and regions should be able to respond to specific patterns of the epidemic. At the same time, Governments in both concentrated and high-prevalence epidemic countries must put in place strategies that adequately focus on the needs of populations that are at higher risk of infection, in particular injecting drug users, sex workers and men who have sex with men. Discrimination, limited access to health services and a lack of specific HIV-prevention policies contribute to making those key affected populations disproportionately vulnerable to the infection.

Our efforts to significantly prevent HIV infections must be coupled with renewed determination to ensure access to treatment for all those in need. We must strive to achieve our collective commitment to provide antiretroviral treatment to 15 million people living with HIV. Recent research indicates that antiretroviral treatment can also contribute to the prevention of sexual transmission of HIV in serodiscordant heterosexual couples. Vertical mother-to-child transmission can also be eliminated if pregnant women living with HIV and their newborns are provided with antiretroviral prophylaxis during pregnancy, delivery and breastfeeding.

Access to medicines is among the biggest challenges to public health, not only from a medical perspective but also from ethical and political standpoints. Price is still one of the main obstacles to increasing the availability and accessibility of medicines for both institutions and individuals. As a result, poor people are the most affected in our societies, as the poorest and most vulnerable countries are at the international level.

The global campaign to fight HIV and AIDS has contributed to the development of a series of initiatives that are helping to face this challenge. The World Health Organization, UNAIDS, the Global Fund, the GAVI Alliance, UNICEF and the International Drug Purchase Facility, among others, as well as private foundations, are working to compensate for the lack of resources in some countries for the treatment of specific diseases such as AIDS. All those initiatives must be coherent and aligned with the priorities of global health.

Emergency actions must integrate larger socio-economic and global health development strategies. While meeting the immediate needs of patients, we must aim to reach sustainable solutions as our utmost goal. The imperative of public health must always prevail over commercial interests. In that sense, issues related to intellectual property must also be addressed. The Doha Declaration on the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) and Public Health was adopted more than 10 years ago, including the understanding that the TRIPS Agreement does not and should not prevent World Trade Organization members from exercising their right to adopt measures to protect public health and to ensure access to medicines for all. Now it is necessary to promote innovative initiatives such as the Global Strategy and Plan of Action on Public Health, Innovation and Intellectual Property. We are convinced that the flexibilities to the TRIPS Agreement are an effective tool that must be used to make our HIV programmes financially sustainable, as well as to achieve the ambitious targets to which we committed ourselves in the 2011 Political Declaration.

Mr. Motanyane (Lesotho): Allow me, at the outset to thank the President for convening this important meeting.

My delegation aligns itself with the statements delivered by the representatives of Botswana and Angola on behalf of the Group of African States and the Southern African Development Community, respectively.

I wish to thank the Secretary-General for the report presented in preparation for this meeting (A/66/757). Indeed, it provides a good basis for today's deliberations.

One year ago, heads of State and Government gave impetus to the global fight against HIV/AIDS when they convened at the High-level Meeting on the comprehensive review of the progress achieved in realizing the Declaration of Commitment on HIV/AIDS (resolution S-26/2) and the Political Declaration on HIV/AIDS (resolution 60/262, annex) in New York, in June 2011. Of great significance was their solemn declaration of commitment to end the pandemic with renewed political will and strong, accountable leadership. It is in keeping with that commitment that we welcome this opportunity to reflect on what has been achieved so far. That is the only way that we can guarantee real progress.

HIV and AIDS continue to be the biggest challenge worldwide, and one of the leading causes of death. Many people are infected every day and many more continue to die from the pandemic. Many children have become orphans as a result of AIDS. Women and children remain the most vulnerable. All of this is more of a reality in developing countries, particularly in sub-Saharan Africa.

Despite the Commitment pledged by world leaders in 2001, 2006 and, most recently, in 2011, progress in curbing the spread of HIV and AIDS is fairly slow. There are a variety of factors that contribute to this slow progress. They include the high levels of poverty, poor health facilities and unaffordable medications for those in desperate need of treatment, as well as unsafe sexual behaviour. The continuing financial and economic crises have exacerbated the situation. Both developing and developed countries experience shortages of resources, and funding for HIV and AIDS has dropped. The sad reality is that it is developing countries that are hit the hardest.

Those challenges require concerted efforts by the international community to intensify the fight against this scourge. We must collectively do all we can in ensuring the availability of adequate resources that will be used to respond to the plight of the millions of infected and affected people around the world. The importance of fighting this pandemic from all fronts cannot be overemphasized. It is in that context that we energetically applaud the United Nations Entity for Gender Equality and the Empowerment of Women, for joining the United Nations system-wide efforts to

fight HIV/AIDS. That will go a long way in bolstering international efforts to empower women and equip them with the necessary skills and tools to fight the disease.

Lesotho is committed to the implementation of the commitments to fight HIV/AIDS. However, with an infection rate of almost a quarter of the population, the challenges Lesotho faces may seem insurmountable. Our country is burdened with a very high number of women and children infected by HIV/AIDS, a high prevalence rate among youth, high numbers of AIDS-related deaths and an overwhelming number of children orphaned by AIDS. Indeed, those are major hindrances to our country's economic development.

The people of Lesotho are known for their resilience. Our determination to eliminate this scourge shall not wane. In the same breath, Lesotho's resolve to achieve the Millennium Development Goals (MDGs), in particular MDG 6, is as alive as ever. The Government continues to embark on advocacy programmes on prevention, treatment and care options for the people and continues to provide treatment to those who need it. It is thanks to the support of its development partners that more than 80 per cent of pregnant women in need of treatment are now receiving it. In that regard, we shall continue to work together with our partners to ensure better coordination and synergies in order to make a huge impact in our efforts for an HIV/AIDS-free Lesotho.

In addition, the Government also provides grants to orphans and vulnerable children in the country to alleviate their everyday burdens. Those grants have made significant impacts on the families concerned and have ensured that they do not go a day without meals.

Allow me to conclude by reiterating the commitment of the Government of Lesotho to the fight against AIDS. The fight against this scourge is a battle for the survival of mankind. HIV/AIDS knows no borders. As the report of the Secretary-General notes, our hope for future generations free of HIV/AIDS is not an illusion. With determination and renewed vigour, we can make this a reality.

Mr. Tsymbaliuk (Ukraine): While we align ourselves fully with the statement of the European Union, I should like to briefly touch on a number of issues that are of particular interest to Ukraine. I should like to thank the Secretary-General for his report (A/66/757) on HIV/AIDS-related achievements, which was issued a year after the General Assembly High-level Meeting on HIV/AIDS.

HIV/AIDS remains one of the major challenges impeding the development, progress and stability of States, and it requires exceptional and comprehensive responses at all levels — international, regional and national. The fight against this disease is among the major priorities of my Government. Ukraine, along with other States, initiated the convening of the historic special session of the General Assembly in 2001 and remains fully committed to both the Declaration of Commitment on HIV/AIDS (resolution S-26/2, annex) and the Political Declaration (resolution 65/277, annex) adopted in June last year.

In that regard, we would like to emphasize our strong support for the Joint United Nations Programme on HIV/AIDS (UNAIDS) global strategy for 2011-2015, which sets out a new vision of the response towards achieving a world with zero new HIV infections, zero discrimination and zero AIDS-related deaths.

Over the past decade, invaluable experience has been gained and significant achievements made in combating the HIV/AIDS epidemic at the national level. Ukraine adopted a law on overcoming the spread of diseases caused by the human immunodeficiency virus and on the legal and social protection of people living with HIV. As a national strategy and as a part of our national legislation, we established the State service of Ukraine for countering HIV/AIDS and other socially dangerous diseases in order to coordinate the efforts of all partners in combating the spread of this disease.

Ukraine has established effective cooperation between the Government and various non-governmental organizations (NGOs) in combating the HIV/AIDS epidemic. The contribution made by civil society cannot be overestimated. We are proud of the fact that the NGOs and, most important, HIV-positive people are the major partners of the Government of Ukraine in the carrying out of its response to the HIV/AIDS threat. It is not by chance that a representative of Ukrainian civil society participated in the opening ceremony of the High-level Meeting held in June 2011.

Among other achievements, significant success has been achieved in the prevention of mother-to-child transmission of HIV, which is recognized as a main goal of the national response to AIDS. Ukraine's success in combating HIV/AIDS is, to a large extent, due to donors, their commitments and the fulfilment of their obligations to the Global Fund to Fight AIDS, Tuberculosis and Malaria. Over the years, the Fund has

become an effective instrument for sustainable help focused on the achievement of significant results.

An $88 million grant from the Global Fund was recently approved for our country. We express our sincere gratitude to all donors that have provided us with assistance and remain reliable partners of Ukraine in the response to HIV/AIDS.

I should like to note that HIV/AIDS has received an unprecedented response from the United Nations system, States Members of the United Nations, the private sector and NGOs. However, in many countries women and girls remain the most affected by the epidemic, and there is a need for a strengthened protection of women and girls from the threat of HIV.

In that regard, we believe that the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women) should pay particular attention to reducing the vulnerability of women to HIV. Ukraine is also pleased to note that addressing the HIV-specific needs of girls and women is among the strategic goals of the UNAIDS programme on HIV/AIDS for 2011-2015.

I should in conclusion like to reiterate Ukraine's commitment to the Millennium Development Goals (MDGs), in particular MDG 6, and to reaffirm its obligations and solidarity in the global fight against AIDS. It is only through a coordinated joint effort that we can combat the remaining global challenges and achieve a zero-HIV society.

Mr. Maksimychev (Russian Federation) (*spoke in Russian*): Russia supported the adoption at the High-level Meeting of the General Assembly held in June 2011 of the Political Declaration on HIV and AIDS (resolution 65/277, annex). We consider it to be a key framework for the strengthening of international cooperation to combat the epidemic in the coming years.

We have carefully read the report (A/66/757) on the implementation of the decisions taken at the High-level Meeting. On the whole, we agree with its assessment of the progress made in the implementation of the far-reaching agenda agreed upon by Member States. We take note of the recommendations regarding measures aimed at halting the spread of the development at the global level, and we are in agreement with most of them.

However, we cannot support proposals relating to the decriminalization of the use of drugs and of the sex industry as a means of combating the stigmatization and discrimination associated with HIV-positive status. In addition, based on the Russian experience, we do not consider substitution therapy to be the correct way of decreasing HIV infections among drug users. We would like to emphasize that the possibility of the implementation of such programmes must be considered solely within the framework of national legislation.

Russia has in a targeted and consistent manner been implementing its commitments to prevent, and promote the early detection of, HIV infections and to ensure universal access both to treatment and to social assistance. Federal legislation guarantees all citizens of the country access to a broad range of preventive programmes and no-cost testing and, for those who are HIV-infected, access to free, high-quality medical assistance and the protection of their rights.

In 2011, the total number of persons infected in Russia accounted for approximately 550,000 people. Today it is clear that the epidemic been stabilized in the country, as the number of cases in the past few years has remained at the level of 62,500 a year. The epidemic has entered into a new and controlled stage and is being kept there. There is no question that a significant role in that respect was played by the tremendous work conducted by the health agencies in the implementation of a whole range of steps within the framework of the high-priority national health project. In 2011, actions designed to test for and treat HIV infections accounted for federal budget allocations of more than $600 million. The same amounts will be allocated in 2012-2013.

Russia ensures 100 per cent access for all HIV-infected individuals in need of medications. Today, some 100,000 people are receiving at no cost highly effective treatment with the most modern types of medications. Those patients who are registered at HIV/AIDS centres receive all necessary prescriptions at no cost, including medications prescribed by their personal doctors according to their individual symptoms in view of the possible simultaneous presence of other illnesses.

Particular attention is being given to efforts to prevent mother-to-child transmission. We have in place an effective system for detecting infection among pregnant women. That makes it possible for us to ensure the birth of a healthy child in 99 per cent of the cases of HIV-infected mothers.

An important role is being played by actions to prevent HIV infections among high-risk groups of the population, including those engaging in high-risk behaviours. To get them to take part in voluntary testing

for HIV infection and treatment, we rely on psychological and social assistance workers and are developing active cooperation with public, non-governmental and religious organizations.

The annual coverage of the population and, above all, high-risk groups through voluntary testing for HIV infections now includes 22 million to 25 million people per year, which represents 15 to 17 per cent of the population of the country.

There is also a system in place in Russia for early detection of HIV-infected individuals, who are detected with HIV 7 to 10 years before the infection becomes full-blown AIDS. The encouraging results in reducing HIV infections have resulted not only from the consistent efforts of the State to counteract HIV infections, which we have undertaken over a period of time, but also a carefully targeted strategy of preventive actions based not on the principles of reducing harm but on programmes of excluding risk. That fundamental distinction has made it possible to carry out interventions, in an extremely complex situation for our country, where drug use is the major driver of the epidemic, and to avoid pessimistic scenarios and keep the epidemic under control.

Our country has been a donor to the Global Fund to Fight AIDS, Tuberculosis and Malaria since 2006, and we are continuing to increase the volume of our contributions. During the same period, Russia's contributions to the Fund amounted to $317 million. Russia has also been constructively interacting with the Joint United Nations Programme on HIV/AIDS, acting as a regional leader in counteracting the epidemic. With the involvement of those organizations, an international forum dedicated to achieving Millennium Development Goal 6 in Eastern Europe and Central Asia was organized in October 2011. The outcome of the forum was a plan of action that consisted of concrete commitments by partner countries, donor countries, international organizations and agencies and civil society to achieving the performance targets by 2015 in the area of combating HIV/AIDS.

Mr. Khan (Indonesia): Allow me, first of all, to thank the President for organizing today's meeting, which reminds us of the successful High-level Meeting on HIV/AIDS convened by his predecessor in June 2011. At that meeting, the General Assembly adopted a historic document entitled "Political Declaration on HIV/AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS" (resolution 65/277, annex). We would like to take this opportunity today to thank the Secretary-General for his comprehensive report (A/66/757) on achieving the targets of the Political Declaration.

Indonesia aligns itself with the statement delivered by the representative of Cambodia, who spoke on behalf of the Association of Southeast Asian Nations.

We gather here today to advance in our shared fight against HIV/AIDS. To date, the HIV virus has killed more than 25 million people worldwide. It is said that every day some 75,000 people contract HIV. In some countries and communities, HIV has raised the spectre of a lost generation, a generation where youth are doomed not to reach or complete their most productive years. In the short and medium terms, the HIV death rate will continue to climb because we have still not found a vaccine or a cure for AIDS.

Up until now, the global community has struggled for 20 years to find a way to bring the HIV epidemic under control. While there have been periodic breakthroughs, it has never been at all clear whether or when the rising tide of HIV infection will be reduced and, if possible, eliminated. However, the past five years have provided clear evidence that we can prevent infection, save lives and improve the quality of life for millions of people threatened, affected and infected by the HIV virus.

Learning from our own experience and from that of others around the world, we must do four things to keep up that momentum. First, we need to learn from past experience and share best practices. Secondly, we must focus our efforts and our resources on strategically important interventions. Thirdly, we have to address the critical social and human rights issues that reduce people's access to the information and services they need to protect themselves from infection. Lastly, we must work in broad partnerships, bringing together the knowledge, influence and expertise of the many players in this vast human drama.

In accordance with the Political Declaration, Indonesia has worked hard to achieve the internationally agreed goals and moved towards the achievement of universal access. We are not there yet but we have made much progress in the past decade. We have laid a solid foundation for important networks of collaboration and developed partnerships that have helped to increase coverage and effectiveness while moving towards self-reliance and sustainability in our response.

Nevertheless, our work is far from over, and we are well aware of the challenges ahead. Too many people remain unreached and unserved. Too many people are still victims of ignorance and counterproductive stigma and discrimination. Without increasing prevention and services for them, we will not be able to bring the epidemic under control. Even though psychological barriers remain, we are seeing progress. Many people are now brave enough to speak out and share their stories. They are involved in finding solutions to the difficulties that AIDS brings to their lives.

It is therefore my hope that greater collaboration and partnerships will result from today's important meeting. It is only by empowering people and strengthening networks that we will bring the HIV epidemic under control. If we work together and work harder, we can achieve universal access for AIDS prevention, care, support and treatment in the near future.

Given the size of Indonesia and the complexity of the AIDS response, the situation will not be brought under control using only one approach or reaching only one segment of the population. We must all be part of the effort and need to embrace and promote a comprehensive, compassionate and inclusive approach.

In the face of the challenges, fighting AIDS in Indonesia is still very much an arduous task, one that is becoming more difficult because the resource gaps in funding for activities and projects to combat HIV/AIDS remain fairly wide. Success will also require us to improve and strengthen our partnership response. Government agencies are fully integrated into the national response. Collaboration with civil society, including faith-based organizations, communities comprising key populations and people living with HIV, is increasing and showing good results. Those partners are key to our national efforts and have full agendas of their own. They also make considerable contributions to the planning, implementation, monitoring and evaluation of our shared national efforts in combating HIV/AIDS.

I wish to assure the Assembly that our Government and people will stay the course in order to help speed up the progress being made in our national response to eliminating HIV/AIDS. In that context, Indonesia lends its support to the draft decision (A/66/L.49) to be adopted at this meeting as part of our commitment to achieving the Millennium Development Goals and formulating the post-2015 United Nations development agenda. Let us move forward from now on as one body, to improve the lives of our friends and family members who are HIV-positive, and to protect our children from infections.

Ms. Ojiambo (Kenya): At the outset, I would like to thank the President for organizing this plenary meeting on HIV/AIDS, and to express my appreciation to the Secretary-General for his comprehensive report (A/66/757) highlighting the progress made so far, the status of the epidemic, the task ahead of us and the road map towards zero new infections, zero discrimination and zero AIDS-related deaths.

My delegation associates itself with the statement made by the representative of Botswana on behalf of the Group of African States.

The year 2015 is almost upon us. The world is at a crossroads. HIV/AIDS is still devastating large sections of our communities and seriously affecting the modest gains made thus far. The countries of Africa are at different stages of addressing the pandemic, with mixed results. While several countries in the region have registered some success in combating it over the past 20 years, the situation is still grave. We have less than three years to make good on our targets for the Millennium Development Goals. The prospects do not look good. We have a lot of work ahead of us and we cannot afford to waver. Yet the challenge is surmountable. Indeed, over the past decade, several countries in Africa, including Kenya, have demonstrated that the epidemic can be tamed by adopting and coordinating an aggressive, multisectoral strategy deeply rooted in the community and with committed leadership at the highest levels.

Though access to essential treatment and prevention has increased, far too many people in need continue to be left behind. We cannot possibly begin to speak of the beginning of the end of AIDS when millions upon millions cannot get essential HIV/AIDS-related aid, new infections continue and international funding is on the decline. The result is that the world will miss the 2015 targets by a considerable margin, a serious indictment of our collective commitment to fighting this scourge.

Not all the news is grim. The prevalence of HIV/AIDS in Kenya has stabilized at about 6 per cent, and new infections have fallen considerably over the years. Sadly, more women are still infected than men and married couples are more affected. Knowledge of HIV prevention methods and testing has increased tremendously. Currently, nearly 600,000 people are under treatment. Such intervention, including treatment,

has helped avert almost 300,000 deaths. The Kenya National AIDS Strategic Plan III was developed in 2009 following emerging evidence from a study of modes of transmission, which identified key drivers of new infections, and a strategic review of the plan's predecessor that identified key gaps and challenges that had hindered achievement of established targets. Under the Strategic Plan III, the following results should be achieved by 2013: first, the number of new infections will be reduced by at least 50 per cent; secondly, AIDS-related mortality will be reduced by 25 per cent; thirdly, reduced HIV-related morbidity; and, fourthly, a reduced socio-economic impact of HIV and AIDS at the household and community level.

To help support its implementation, the Strategic Plan is organized around three main areas: health-sector HIV service delivery, sectoral HIV mainstreaming, and community-based HIV programming. The Plan's highlights are, first, the provision of cost-effective services informed by a rights-based approach aimed at achieving universal access to prevention, treatment, care and support; secondly, targeted, community-based programmes in support of universal access and social transformation for an AIDS-informed society in all communities; thirdly, long-term programmes addressing both the root causes and the effects of HIV; and fourthly, ensuring that all stakeholders operate within a nationally owned harmonized and aligned framework at all levels.

The fight against the HIV/AIDS scourge continues at all levels. Kenya notes with appreciation the recent signing of a memorandum of understanding between the Joint United Nations Programme on HIV/AIDS and the New Partnership for Africa's Developemnt on the operational framework for strategic cooperation and coordination aimed at delivering results in the areas of sustainable financing for health and development.

Despite such hard-won successes and initiatives, HIV/AIDS continues to be a major concern for the Government of Kenya. Some of the notable challenges include, first, financing for scaling up AIDS resources. During the 2010-2011 and 2011-2012 fiscal years, from its combined donor and Government sources the country spent $687 million on HIV and AIDS responses. The bulk of HIV and AIDS financing in Kenya comes from the donor community, a partnership for which we are grateful. Our budget allocation for HIV/AIDS has to contend with competing priorities, such as malaria. We need to explore alternative financing arrangements to complement domestic and donor support. With its devolved system of governance, the Government is seeking new ways of mainstreaming HIV/AIDS action into key sectors of the economy. In order to back up the renewed zeal for local budgeting for HIV and AIDS programmes in the central Government and local authorities, the budget must be ring-fenced so that it is not used for purposes outside the HIV and AIDS Plan.

Secondly, there is the issue of human resources for health in Kenya. The provision of quality health services is a labour-intensive business that demands qualified health workers. However, many health-sector workers are departing the country for developed economies, leaving the health sector under-resourced, as was mentioned earlier by the Permanent Representative of Australia. Taking its investment framework into consideration, Kenya requires investments of about $80 million per year for five years in order to put in place a reasonably sized health workforce.

Thirdly, there is the issue of affordable commodities and low-cost technologies, including drugs, medical supplies and equipment, which are major factors in the high cost of health care. Legislative reforms to facilitate the use of high-quality generic drugs and standardized medical equipment could reduce costs, as could increased investment in low-cost prevention technologies such as microbicides, vaccines, school health education and voluntary counselling and testing. Kenya continues to focus investments on reducing the vertical transmission of HIV, which is a target we can achieve.

Fourthly, there is the matter of human rights, stigma and discrimination, and gender equity issues.

Awareness of legal, treatment, care and rights aspects among people living with HIV/AIDS and health workers needs to be enhanced.

Lastly, stigma and discrimination contribute to low utilization of voluntary counselling and testing services, especially in rural areas.

In conclusion, I wish to say that the provision of universal access to prevention, care, treatment and support services requires more than access to antiretroviral drugs. It requires trained health-care professionals, suitable facilities, current information and increased funding — all integrated within a fully functional health-care system. It is incumbent upon us to act in order to help our people. Our inaction is making the world a more dangerous place to live in. Individual

efforts, however feeble, will make a difference. But, for now and always, let us race to the goal of zero: zero new infections, zero discrimination and zero AIDS-related deaths.

Mr. León González (Cuba) (*spoke in Spanish*): With nearly 35 million people infected around the world, the HIV epidemic continues to pose a global challenge. No country has escaped its effects. We live in a very unequal world. The distribution of resources and opportunities is extremely lopsided, with the poor continuing to be those most affected. Likewise, the worldwide economic and financial crisis and the rise in the cost of food, medicine and treatment continue to put the brakes on progress in the majority of low- — and middle-income countries. The considerable advances in the elimination of the HIV/AIDS pandemic are insufficient. The major obstacles to achieving universal access to prevention, treatment and care for patients and their families include stigma, discrimination and gender inequality. It is therefore critical to eradicate extreme poverty and hunger, to promote equality between the sexes and the empowerment of women, to guarantee the right to education and health for all people on an equal basis as the most basic right of human beings, and to provide comprehensive sex education to adolescents and youth.

The efforts of the countries of the South to achieve the Millennium Development Goals, including the goals related to health, will be effectively obliterated despite the political will to attain them. We urge developed countries to fulfil their development commitments and to repay their historical debt to the countries of the South.

Cuba believes that the enjoyment of the highest possible level of physical and mental health is a fundamental and inalienable right of all human beings, irrespective of their nationality, race, gender, beliefs, religion, sexual orientation or any other pretext used to justify discrimination and the denial of access to health rights. That right does not simply enjoy broad legal support in Cuba; it is broadly implemented despite our country's limited resources and the ironclad economic and commercial blockade imposed by the United States, with its deplorable consequences for the health of the Cuban people. That irrational policy inhumanely prevents us from having access to new medicines and technologies being developed in the world.

The Cuban health system is characterized by free, universal access to all. With respect to meeting the challenge of the HIV/AIDS pandemic, we have in place a multisectoral programme of HIV/AIDS prevention and control that guarantees free medical services to 100 per cent of the population. Interventions are carried out at the level of monitoring and universal access to antiretroviral treatment, while simultaneously guaranteeing the right to employment, full salary, health-adjusted nutrition and the full exercise of social and political rights for people infected with HIV/AIDS.

Cuba produces six antiretroviral medicines and is continuing to conduct research into more effective medicines and a vaccine. At the same time, we have been fortunate to have the support of the United Nations and other organizations that have contributed to strengthening our country's response to the pandemic. Currently, we have eliminated mother-to-child transmission of HIV/AIDS; the transmission of the virus through blood transfusions has also been brought under control. Furthermore, there is now a low incidence of HIV in the population between the ages of 15 and 49, in pregnant women and in people infected with sexually transmitted diseases. In addition, the use of condoms has increased, especially among young people.

Civil society has been a mobilizing factor in the prevention of HIV. Most noteworthy has been the active participation of young people, women, men who have sex with other men, people with HIV, and community leaders with ties to health centres, scientific institutions and community organizations. Similarly, Cuba has extended its modest solidarity in the health field to other third world countries. Today, 38,868 health professionals, 15,407 of them doctors, are stationed in 66 countries around the world, and more than 14,000 students from 122 countries have graduated from the Latin American School of Medicine or other study programmes.

More than 30 years after the emergence of AIDS, 11 years after the adoption of the Declaration of Commitment on HIV/AIDS (resolution S-26/2) and a mere three years from the target for achieving the Millennium Development Goals, we must urgently renew our political commitment and accelerate the global response in order to halt the virus and prevent it from spreading.

A unified response that brings all parties together in solidarity, along with international cooperation,

constitutes the only path for arriving at sustainable responses and for facing the common challenges of our globalized, unequal and excluding world, which is a threat to all.

Mr. Srivali (Thailand): Allow me first and foremost to align my remarks with the statement delivered by the distinguished representative of Cambodia, in his capacity as Chair of the Association of Southeast Asian Nations (ASEAN). I would also like at the outset to express Thailand's appreciation and support for the report prepared by the Secretary-General (A/66/757) under this agenda item as well as for the recommendations contained therein.

In the same vein, I would like to express our full support for the draft decision (A/66/L.49) to be adopted today, which will maintain the momentum for continued and renewed commitments on HIV/AIDS, both within global efforts to achieve the Millennium Development Goals by 2015 as well as within discussions to formulate the post-2015 development agenda. That, we believe, will be a critical reiteration by the General Assembly of the key understanding that HIV/AIDS is much more than a health challenge.

It has been one year since world leaders met in the Hall to endorse the 2011 Political Declaration on HIV/AIDS (resolution 65/277, annex). We said then and we say again today that the international community must unite for universal access. For Thailand, that goal and principle will continue to be the foundation of our national HIV/AIDS response, which we have reinforced with our pledge to achieve zero HIV infections, zero discrimination and zero AIDS-related deaths.

Since the High-level Meeting last year, Thailand has continued to make substantial progress in our national HIV/AIDS response, particularly in the prevention of HIV infection among the general population and the prevention of mother-to-child transmission. But we must also look ahead to anticipate new challenges. In Thailand, we project that for the next five years, certain key affected populations will account for more than 90 per cent of new infections. They include men who have sex with men, sex workers, injecting drug users and partners in a relationship in which one person is HIV-positive, knowingly or unknowingly. As we work towards the three zeroes, we will seek not only to consolidate our successes. We will do more to address the legal, social and environmental factors that hinder access to prevention and care services. We will work harder to fight stigma and discrimination. At the same time, we will continue to maintain a rights-based and gender-sensitive approach, which is integral to providing high-quality prevention services to all key populations.

In a few short years, ASEAN will become one community. It will therefore be more important than ever for ASEAN member countries to work closely together to combat HIV/AIDS. In that regard, we have been working to improve coordination and cooperation beyond our borders, and hope to continue providing critical HIV prevention, treatment and care for migrant workers, with support from the Global Fund, to which Thailand also contributes.

Last but not least, Thailand will continue to aggressively scale up life-saving treatment programmes, which have relied mostly on domestic funding and very little on international sources. In that respect, the flexibilities of Trade-Related Aspects of Intellectual Property Rights (TRIPS) will continue to be an essential contributing factor in our efforts to achieve universal access. From our experience, it has become abundantly clear that TRIPS flexibilities help ensure that people living with HIV around the world have access to care and treatment. That is a critical understanding that the international community must continue to reiterate again and again. My delegation is therefore gratified to see that the Secretary-General recommends in his report that countries should maximize the use of flexibilities under international intellectual property provisions to lower the costs of medicines. We are also greatly encouraged by the report's recognition of the need for greater action to promote and protect access to medicines, and that care should be taken by all parties to avoid the imposition of measures through free trade agreements that limit the flexibilities now permitted under TRIPS.

We have come far in our struggle to overcome HIV/AIDS. It has been a long, difficult road, but the international community can count on us to continue on the path, shoulder to shoulder with partner countries and organizations, until we all arrive at our common destination, a world free of HIV/AIDS.

Mr. Amit Kumar (India): The 2011 Political Declaration on HIV and AIDS (resolution 65/277, annex) provides a clear road map towards the vision of a world with zero new infections, zero discrimination and zero AIDS-related deaths through a series of pledges and concrete commitments. The report of the Secretary-General (A/66/757) documents the progress made,

but also highlights the critical challenges, including substantial access gaps for key services and the first ever decline — of 13 per cent — in HIV funding, in 2010, which can potentially jeopardize efforts to sustain progress in combating HIV/AIDS.

The national response to HIV and AIDS in India is implemented through the National AIDS Control Programme, which has yielded encouraging outcomes in terms of the prevention and control of HIV over the past decade. The number of new HIV infections annually in India has declined by more than 50 per cent during the past decade. The HIV prevalence in India is estimated to be 0.31 per cent. There has also been a decline in AIDS-related deaths.

Our national efforts have focused on high-risk groups, expanding services and improving access to antiretroviral therapy. We are also working to build the capacities of health care providers, as well as civil society and affected communities, in tackling HIV.

We are conscious that persons infected with HIV still face stigma. We are committed to fight such stigma so that people living with HIV can live lives of dignity.

Prevention remains the major focus area for us. Our HIV-prevention strategies target populations at risk for HIV and ensure access to services and information on HIV prevention, treatment and support services to those in need.

Our targeted intervention programmes have several key components, namely, generating awareness about HIV/AIDS, the prevention and control of sexually transmitted infections, behaviour change communication, promoting the distribution of free condoms, including social marketing of condoms, and counselling and testing services.

Peer education is the backbone of the targeted intervention programme in India. It has ensured community participation in planning, implementing and monitoring the programme and has led to community ownership of the programme.

We have been able to achieve a significant scaling-up of targeted interventions for all high-risk categories. Our national response has also recognized and factored in the impact of migration and mobility in the spread of HIV infection.

All of those efforts are in line with our firm commitment to work towards reducing both the sexual transmission of HIV and the transmission of HIV among people who inject drugs by 50 per cent by 2015.

With regard to the mother-to-child transmission of the infection, we continue to take proactive measures. Our coverage for preventive interventions has expanded, from 2.3 million pregnancies in 2007 to over 10 million pregnancies in 2011, through better detection of HIV positivity among pregnant women. Our target is to enhance the coverage to 14 million pregnancies by 2017.

The National AIDS Control Programme continues to strengthen its linkages with the National Tuberculosis Control Programme to ensure HIV testing among all tuberculosis patients and provide antiretroviral therapy to all those found to be HIV-positive, irrespective of CD4 counts, as per the latest World Health Organization guidelines.

We remain fully committed to providing access to antiretroviral treatment to 15 million people by 2015. It is imperative that the international community remain fully engaged and assist in bridging the resource gaps. The international community has to dismantle barriers that obstruct universal access to treatment. A key barrier is the high cost of antiretroviral medicines.

India is currently meeting approximately 80 per cent of the global antiretroviral drug demand. We remain committed to using all flexibilities under Trade-Related Aspects of Intellectual Property Rights to ensure the availability of affordable and quality medicine to all people living with HIV.

We believe that considerations of commerce and profitability must not be used to erect artificial barriers between life and death. The international community must increase funding and dismantle barriers to improve the availability of affordable and quality drugs for the needy and impoverished.

Our successful national efforts have been underpinned by the early recognition and the adoption of a participatory approach with all stakeholders, including health care providers, local communities and civil society organizations, as well as working closely with donor partners, for the optimal utilization of resources while avoiding the duplication of work and implementing lessons learned from one region of the country to other parts.

In conclusion, we reaffirm our full commitment to all targets and commitments previously made and to those in the 2011 Political Declaration on HIV and

AIDS, with a view to halt and begin to reverse by 2015 the spread of HIV.

We also call upon partners, the international community, donors and international agencies to renew political commitment to ensure adequate funding and support for nationally driven, credible, evidence-based, inclusive and comprehensive national HIV and AIDS strategic plans to contain and combat HIV and AIDS.

Mrs. Aitimova (Kazakhstan): The delegation of Kazakhstan welcomes the submission of the draft decision (A/66/L.49) entitled "Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS". Recalling the ambitious objectives set up by the 2011 Political Declarations on HIV/AIDS (resolution 65/277, annex), it is vital that all partners reiterate their obligations to millions of people living with HIV. It is crucial to evaluate the progress made towards creating a world with zero new HIV infections, zero discrimination and zero AIDS-related deaths by 2015.

Despite the efforts made and the significant achievements of the international community, HIV/AIDS continues to adversely affect sustainable development. The pace of the epidemic is still much greater than that of the global efforts to combat the AIDS epidemic. Currently, HIV remains an incurable disease despite the large financial investment and scientific research worldwide. At this critical turning point, the world is moving from addressing AIDS to ending the epidemic.

Since the adoption of the Declaration of Commitment on HIV/AIDS (resolution S-26/2), at a special session of the General Assembly in 2001, my country, in line with the international commitments and its national ownership, has achieved certain success. As a result of national activities on the prevention, diagnosis and treatment of HIV, the infection has been stabilized at the concentrated stage.

The World Economic Forum's Global Competitiveness Report ranks Kazakhstan at 22 — 0.18 per cent — when it comes to the prevalence of HIV. It is noteworthy that our HIV rate dropped by 14 per cent from 2008 to 2011.

While taking a comprehensive approach at all levels to eliminate the spread of HIV, Kazakhstan pays particular attention to the key populations at higher risk of infection. Consequenty, the rate of HIV transmission as a result of injecting drug use declined by one third between 2006 and 2011, from 66 per cent to 44 per cent. Antiretroviral coverage for people living with HIV stands at 83.3 per cent, as compared with 23 per cent in the Eastern Europe and Central Asia region.

In an effort to meet the targets of the Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping Their Mothers Alive of the Joint United Nations Programme on HIV/AIDS (UNAIDS), Kazakhstan has included preventive antiretroviral treatment for pregnant women in its guaranteed free health care.

In order to reduce the risk of HIV transmission during pregnancy and delivery, the coverage for antiretroviral treatment has been raised to 92.5 per cent. Consistent with the national course to eliminate stigma, discrimination and violence against people living with, and affected by, HIV, along with the Government there are some 97 HIV-related non-governmental organizations carrying out activities to overcome social exclusion.

My delegation strongly supports the recommendations contained in the report of the Secretary-General (A/66/757), especially those relevant to the decisive role of fund-raising, increased accountability and the elimination of duplicative systems of services for addressing HIV. Kazakhstan highly commends the teamwork of the United Nations sister agencies, such as the World Health Organization, UNAIDS, UNICEF, UN-Women and others to remain focused on cross-cutting issues in responding to HIV. Nevertheless, there is still room for further improvement of the mechanisms of interaction.

We also encourage partners to continue exploring measures to ensure greater availability and affordability of essential medicines. The position of my delegation is that national legislation should be designed in a way so as to improve the lives of citizens. In that context, we consider the proposal to scale up domestic and regional production of antiretroviral drugs in the regions that are most affected by the infection as truly promising.

In conclusion, I would like to reaffirm Kazakhstan's support of the forthcoming special event of the General Assembly in 2013 as a dramatic step to assess progress and provide the basis for a post-2015 HIV-related road map.

Mrs. Bibalou (Gabon) (*spoke in French*): My delegation is pleased to participate in this high-level

plenary meeting of the General Assembly on assessing the progress made by the international community in the fight against the HIV/AIDS pandemic.

The adoption by the General Assembly, in June 2011, of a new Political Declaration (resolution 65/277, annex) allowed us to reaffirm our shared commitment to combating this pandemic based on the goals of zero new infections, zero discrimination and zero AIDS-related deaths. I would like to take this opportunity to thank the Secretary-General for his report contained in document A/66/757, which provides a comprehensive view of the progress made and the outstanding challenges remaining in this area.

My delegation would like to associate itself with the statement made by the representative of Botswana on behalf of the Group of African States.

The High-level Meeting of June 2011 underlined once again the magnitude of the pandemic, which has become not only a real obstacle to development but also a cross-cutting threat to international peace and security.

As a member of the Security Council, Gabon made its modest contribution to the consideration of this issue by convening under its presidency, on 7 June 2011, a Council meeting (see S/PV.6547) on the impact of the HIV/AIDS epidemic on peace and security issues, during which resolution 1983 (2011) was adopted.

Within the framework of the implementation of the 2011 Political Declaration, the Government of Gabon has defined new strategies on awareness-raising and communication among the population. That proximity approach is aimed at improving the behaviour of individuals faced with problems of prevention, testing, care and treatment of sexually transmitted infections, in particular HIV/AIDS. It is also aimed at reducing the number of new infections and mitigating the impact of HIV/AIDS on individuals, families and communities. In that context, the Government has signed a partnership with Pari Mutuel Urbain Gabonais aimed at better coordination and dissemination of prevention strategies throughout the national territory. In implementing this new vision, the Government recently adopted an operational plan for communication that provides for the distribution in 2011-2012 of messages, publicity spots and broadcasts on prevention that are adapted to local contexts and transmitted by reliable channels in the field.

In addition to the efforts undertaken by the Government, non-governmental organizations are also playing an active part in awareness-raising about the dangers of HIV/AIDS. A major effort in that regard was the 2012 "African Nations Cup without AIDS" campaign, organized by the First Lady of Gabon's foundation with the assistance of the l'Organisation panafricain de lutte pour la santé and the Red Cross of Gabon. Those activities took place mostly in the two cities that hosted the African Nations Cup, namely, Libreville and Franceville. More than 150 volunteers spread out over those two cities to disseminate information, raise awareness and mobilize the population on the dangers of the epidemic. As a result of this campagin, 1,500 people were tested, 488,800 condoms were distributed and 43,000 people were directly made aware of the disease. Moreover, it should be noted that those efforts were complemented by the participation of the legendary Brazilian soccer player Pelé, the king of football, and by Olympic gold medal winner Samuel Eto'o.

Despite the considerable efforts our States have made to roll back the HIV epidemic, the magnitude of the scourge remains a serious concern. We must continue to call for the mobilization of additional resources. Numerous programmes now being implemented, particularly in Africa, where the number of infected people with HIV remains high, require continued financing. It would be unfortunate to see the efforts of the international community diminish at a time when we are just beginning to reap the fruits of our campaign and when science has been making encouraging progress in the area of research.

Mrs. Morgan (Mexico) (*spoke in Spanish*): I am pleased to take the floor today, one year after the adoption of the Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS (resolution 65/277, annex) during the High-level Meeting on HIV/AIDS, held from 8 to 11 June 2011. I would like to express my gratitude to the Secretary-General for his report (A/66/757) on options and advances for the swift implementation of the Political Declaration and for the preparations being made for the high-level event that will be held in 2013. The Political Declaration includes noteworthy advances, such as the setting of goals in the areas of universal access and new commitments in those of prevention, financial resources, the strengthening of health-care systems and efforts in the area of innovation.

My delegation believes that it is important to highlight the progress that we have achieved in the

Declaration: by calling for reducing stigma, by including a code of ethics for human rights in fighting HIV/AIDS and by including references to provide greater visibility for those populations at higher risk for infection. We know that there are some 33.3 million people living with HIV around the world and that new infections decreased by 20 per cent over the past. With regard to a topic that is perhaps the most visible in the area of universal access, global antiretroviral treatment coverage stood at 36 per cent in 2009. Latin America is today the region with greatest coverage for those in need, who have been receiving antiretroviral treatment at a rate of 51 per cent coverage. Despite that progress, there is still much to be done.

Countries need to join efforts to establish regional and global partnerships, including with stakeholders such as civil society organizations, people living with HIV, academia, the scientific community, the United Nations and other entities for cooperation, with a view to providing a coherent response to the HIV/AIDS epidemic and to meet the goals to which our countries commited themselves in adopting the Declaration of Commitment (resolution S-26/2) and the Political Declaration on HIV/AIDS, as well as to meet Millennium Development Goal 6.

With the view to improving and making more effective our response to the epidemic, it is essential that, as soon as possible, all countries have in place sustainable mechanisms for providing antiretroviral treatment to people who need it in a timely, sustained and permanently cost-free manner. We need to work to reduce the cost of antiretroviral treatment, both in low- — and middle-income countries. We also call for redoubling efforts to considerably increase prevention and health care with a focus on groups at greatest at-risk populations for HIV/AIDS, without neglecting the population as a whole.

To the extent that we manage to respond to HIV/AIDS by bringing all those elements together, we will be providing a sound and successful response to the epidemic.

Mr. Benmehidi (Algeria): At the outset, I would like to thank the President for convening this plenary meeting on the implementation of the Declaration of Commitment on HIV/AIDS (resolution S-26/2, annex) and the Political Declaration on HIV/AIDS (resolution 65/277). I would also like to thank the Secretary-General for his report (A/66/757).

We are please to participate in this meeting, which provides us with an excellent opportunity to reaffirm our commitment to reach the goals we set at the 2011 High-level Meeting on AIDS aimed at achieving the vision of zero new HIV infections, zero discrimination, and zero AIDS-related deaths.

My delegation aligns itself with the statement delivered by the representative of Botswana on behalf of the Group of African States.

The Secretary-General's report (A/66/757) entitled "United to end AIDS: achieving the targets of the 2011 Political Declaration" points to mixed progress in the fight against HIV/AIDS worldwide. On the positive side, it outlines that 2.5 million deaths are estimated to have been averted since 1995 due to the increase in access to antiretroviral therapy, with 350,000 new HIV infections averted in children. Furthermore, it stresses that the gains made in preventing new HIV infections are at their lowest level since the peak in the mid-2000s. However, the report also warns that AIDS remains one of the greatest challenges of our time. More than 34 million people are still living with HIV.

We fully share the concern highlighted in the report regarding the particularly dire situation in sub-Saharan Africa, which remains the most heavily affected region and accounts for 68 per cent of all people living with HIV and for 70 per cent of all people newly infected in 2010. We strongly believe that the international community should pay special attention to the adverse impact of the situation, which jeopardizes socio-economic progress in the region.

My delegation is pleased that the report includes certain recommendations, which we fully support, in particular those referring to the need to integrate control and prevention activities with efforts at socio-economic development. We also appreciate the Secretary-General's call for building new partnerships and for a new approach to HIV investment in order to mobilize necessary resources, including the goal of reaching the target of devoting $22 billion to $24 billion for HIV by 2015.

The Algerian Government is highly committed to preventing and treating AIDS. Our adult HIV/AIDS prevalence is estimated at 0.10 per cent. Since 1989, my country has been implementing a national strategic plan based on a multisectoral response to this scourge. The implementation process of our national plan to fight HIV/AIDS focuses on several specific

activities, including measures to prevent the spread of infection, free antiretroviral treatment, free voluntary counselling and free testing services. Most important, my Government has placed prevention at the centre of its strategy by scaling up its efforts in targeted intervention for high-risk groups, education and communication packages for specific segments of the population and scaling up the service-delivery component. We have also mainstreamed HIV/AIDS prevention, care and treatment in all Government projects and activities and have actively involved civil society and other stakeholders as partners in working towards that goal.

My delegation strongly believes that the fight against HIV/AIDS has not only human rights and health dimensions but also socio-economic and development dimensions. We are also of the view that national and international funding for responses to HIV/AIDS is still insufficient, given the magnitude of the epidemic, and that the global financial and economic crisis continues to have a negative impact on the response at all levels. In that regard, we would like to take this opportunity to make the following proposals. Laying emphasis on prevention is of prime importance to the control of HIV/AIDS, particularly by developing countries with inadequate resources. It is also of critical importance to improve access to affordable medicines, including generics, to scale up access to affordable HIV treatment, to explore options for producing essential medicines in the most affected regions and to make use of the flexibilities inherent in the Doha Declaration on the Trade-Related Aspects of Intellectual Property Rights Agreement and Public Health.

HIV/AIDS medicines, treatment and care are costly, and developing countries face serious difficulties with their responses in terms of financing and technology. Therefore, there is an urgent need for developed countries and international organizations and funds to strengthen their cooperation in assisting developing countries, especially those in sub-Saharan Africa, in their fight against HIV/AIDS. The necessity of adopting a holistic approach that includes effective prevention strategies and access to low-cost, affordable treatment for all cannot be overemphasized for an effective fight against the pandemic.

Before concluding, allow me to reiterate Algeria's strong commitment and firm resolve to fight this epidemic in a concerted and collaborative way.

The Acting President (*spoke in French*): We have heard the last speaker for this meeting. We will continue our consideration of this item this afternoon.

The meeting rose at 1.15 p.m.

United Nations A/66/PV.116

General Assembly
Sixty-sixth session

Official Records

116th plenary meeting
Monday, 11 June 2012, 3 p.m.
New York

President: Mr. Al-Nasser ..... (Qatar)

In the absence of the President, Mr. Thomson (Fiji), Vice-President, took the Chair.

The meeting was called to order at 3.05 p.m.

Agenda item 10 (*continued*)

Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declarations on HIV/AIDS

Report of the Secretary-General (A/66/757)

Draft decision (A/66/L.49)

Mr. Wetland (Norway): Global trends regarding HIV/AIDS are pointing in the right direction. The scientific achievements have been remarkable, and unique partnerships have been created. While there is room for celebration, there is no room for complacency. We would like to highlight the following elements that need our attention.

We need to work smarter to ensure that the funds available are spent in the best possible way. In particular, that means we must invest where the needs are greatest. The investment framework developed by the Joint United Nations Programme on HIV/AIDS and others is an important tool for that purpose. Particular emphasis must be put on reaching groups that are at a high risk of becoming infected and infecting others, be they migrant workers, persons who sell sex, men who have sex with men, injecting drug users, prisoners or others.

Working smarter also means ensuring that HIV is not addressed in isolation and that synergies are created with other services, such as tuberculosis detection and treatment. Links with other reproductive health services are of particular importance. Preventing infections from mother to child is an important intervention that must be firmly connected to other health services aimed at women and babies. It is discouraging to learn from the Secretary-General's report (A/66/757) that many women are given treatment that is suboptimal for preventing such transmission. We encourage countries to provide dual prophylaxis and to link services closely to antenatal health services.

Facts and figures tell us that proper sexual and HIV education in schools and other venues is important, and also that we should provide youth-friendly access to sexual and reproductive health services. While condoms will never be the single solution to HIV prevention, they are an indispensable part of prevention, and it is therefore discouraging that they are still hard to find in many places. Female condoms are needed to supplement male condoms, and more efforts should be made to develop new generations of such condoms. In HIV prevention and in order to protect public health interests, we must try to reduce the harm done by negative behaviour and practice. Needle and syringe programmes, medically assisted therapy and other such interventions aimed at injecting drug users should be seen as low-hanging fruit that can be implemented regardless of the legal framework for drug use. We have very good experiences in that area in Norway, where we unfortunately have a high

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number of injecting drug users with, happily, very low HIV infection rates in that group.

Sixty per cent of people with HIV infection are girls and women. We also know that gender-based violence correlates with HIV infection and that it is important to counteract it. Gender work is not only for women, it is very important to work with men and boys to change negative notions of masculinity and promote gender equality.

Over the last decade, an incredible increase in resources has been seen through global mechanisms and large donor-driven programmes. Norway contributes around $75 million annually to the Global Fund alone, and that is only a part of our HIV policy. But we are watching carefully. Some so-called recipient countries still spend little of their own budgets in funding HIV efforts. Now it is time that those countries enter into an active partnership, including on the funding side, as a way of developing even more sustainable responses to HIV. If we all work together, in a smarter and more consolidated way, we may in some years be able to find ourselves in a situation where HIV belongs to history.

Mr. García González (El Salvador) (*spoke in Spanish*): Allow me to express the satisfaction of my delegation upon the President's initiative of convening this plenary meeting on the implementation of the Declaration of Commitment on HIV/AIDS (resolution S-26/2, annex) and the Political Declaration on HIV/AIDS (resolution 65/277, annex), particularly at a time when the international community is making significant progress in the containment, treatment and prevention of the pandemic. El Salvador would like to avail itself of this opportunity to thank the Secretary-General and the entire United Nations system for their efforts in fighting this disease, which has taken the lives of thousands of human beings and which represents a collective challenge of an enormous magnitude.

El Salvador has a 0.8 per cent national prevalence of the epidemic. It is concentrated among sex workers, who represent 4.5 per cent, men who have sex with men, 10.8 per cent, and transgender persons, 23 per cent. Over the past three years, we have witnessed a reduction from 6 to 4.5 in new infections each day, as well as in hospital deaths. El Salvador has adopted the strategy called reaching zero, thereby reaffirming its commitment to the 2011 Political Declaration on HIV/AIDS.

In addition, our Government has made a significant effort to fight stigma and discrimination against sectors of the population vulnerable to the epidemic. In 2010, a presidential decree was adopted against stigma and discrimination on the basis of sexual orientation or gender identity. Similarly, in December 2011, in the context of World AIDS Day, an intense public campaign called "Don't label me" was launched with a view to reducing stigma and discrimination against lesbian, gay, bisexual and transgender people and to promoting the use of health services, which are free for the entirety of our population.

The Government of El Salvador has achieved significant progress with regard to the human rights of those living with HIV. For example, we have gradually taken on the purchasing of antiretroviral drugs and the provision of treatment, in accordance with the World Health Organization guidelines. In 2011, for the fifth time, we held the national day for HIV testing, administering more than 88,000 tests in one day alone. We also have special screenings in all the penitentiary facilities in the country. Those who are detained and living with HIV/AIDS receive treatment like any other patient.

At the institutional level, we created a secretariat for sexual diversity and an office for HIV in the office of the Public Defender of Human Rights. Furthermore, we have redoubled our efforts to incorporate sexual education into our school curricula in order to support adolescents and youth in their efforts to make responsible decisions with regard to their sexuality.

With regard to mother-to-child transmission, we have trained health-care workers to promote the prevention of HIV/AIDS in the population in general and particularly among pregnant women. That includes diagnoses that facilitate detection and timely treatment, which have made it possible for us to reduce the transmission of HIV and congenital syphilis. Free antiretroviral therapy is provided to mothers and breast milk is also provided to children of HIV-positive mothers for a full year in order to prevent transmission through breastfeeding. There is also an 18-month period of medical follow-up for those children.

Despite the challenges posed by our vulnerability to climate change and natural disasters, our country has maintained a constant focus on this issue. During the national emergency caused by the tropical storm 12E at the end of 2011, we included the prevention of sexual

abuse and the provision of care for those with HIV as strategic components in the guidelines for managing the shelters. We also established a contingency plan so that no patient would lack antiretroviral medications.

We are also working with the national programme for tuberculosis and cooperative efforts are being undertaken to reduce coinfection. There are two mobile units for HIV testing in areas where there is no clinical facility or among the most vulnerable groups. And since March of this year, a mobile unit has been deployed that takes X-rays and detects cases of tuberculosis.

On the regional and international levels, it is worth pointing out that in 2011 El Salvador was a leader in the presidency of the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS, together with Brazil and Mexico, the other members of the Group of Latin American and Caribbean States on the Board. We were able to ensure the issuance of a ministerial declaration by Central American ministers of health in which they reiterated the region's commitment to fighting HIV/AIDS in close cooperation with civil society organizations and the networks of people living with HIV/AIDS. The declaration also called for promoting South-South cooperation and urged donor countries and entities to not punish with budget cuts those countries that have brought about substantive reductions in their epidemics.

On the Central American level, during El Salvador's temporary presidency of the Council of Ministers of Health of Central America and the Dominican Republic, it was noted that the subregion was close to controlling the pandemic and that progress against HIV in the subregion required an additional and sustained effort from Governments and their respective societies in order to not fall behind on the progress achieved. There was also a reaffirmation of the commitment to advance all of the resolutions adopted at the June 2011 High-level Meeting of the General Assembly, as well as of the Central American commitment to strengthen the regional response to HIV. The commitment also involved other governmental sectors and civil society organizations in order to strengthen national information systems, with a view to developing periodic and timely reporting on indicators, with strategic information to be used in the decision-making process.

Since 2011, El Salvador has presided over the regional coordination mechanism for Central America, which has allowed us to make progress in the regional strategic plan and work closely with the ministers of health, cooperation agencies and regional representatives of civil society and people living with HIV.

Allow me to conclude by ensuring the consistency of all of the activities undertaken in El Salvador in the fight against HIV/AIDS and in compliance with the Declaration adopted in New York in June 2011. We therefore reiterate our country's political will to support the commitments adopted globally in the Declaration, so that we can achieve the goal of zero new HIV infections, zero stigma and discrimination and zero HIV-related deaths.

Ms. Mweemba (Zambia): May I begin by thanking the President for convening this important exchange on agenda item 10. Let me also say that Zambia welcomes the report of the Secretary-General (A/66/757) and commends him for its comprehensive nature.

My delegation aligns itself with the statements made by the representative of Botswana on behalf of the African Group and by the representative of Angola on behalf of the Southern African Development Community.

The 2011 Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS (resolution 65/277, annex) highlights the situation on the ground in terms of HIV incidence, prevalence and the factors that lead to reinforcing the epidemic. It also elucidates measures for the accelerated achievement of the Millennium Development Goal on HIV. Our leaders declared 2012 as a year for universal access to prevention, treatment and care and support. Zambia equally realized that treatment is essential to prolonging the lives of people living with AIDS, and that it is an adjunct to prevention.

Whenever we speak of the three themes for HIV, we need to emphasize prevention, so that it cuts across all three themes, namely, prevention; treatment and prevention; and impact mitigation support and prevention. The Government of Zambia has made efforts to reposition prevention centre stage in the fight against HIV and AIDS. Numerous prevention symposiums have been held across the country in order to give prominence to prevention strategies, starting with the 2010 high-level symposium attended by the President and Vice-President of Zambia, as well as the meeting of the Champions for an HIV-Free Generation.

As the world races towards the Millennium Development Goal of reducing sexual transmission of HIV by 50 per cent and the elimination of new infections in children and other prevention outcomes, let us find synergies with the post-Rio sustainable development agenda. In addition, I wish to reiterate the calls for enhanced research for a multiprotection product with high public health efficiency and effectiveness. Treatment is a type of prevention, but only prevention can be said to be sustainable. My delegation therefore makes an appeal to donor agencies for more funding towards prevention research.

Furthermore, I wish to emphasize the issue of orphans and vulnerable children. While it gives some level of comfort to note that the number of children orphaned by HIV appears to have peaked in 2009, at 17 million, caution should be exercised, since vulnerability is a key determinant for HIV acquisition, as well as for gender and sexual violence. That compounds the scenario for HIV acquisition among orphans and vulnerable children. In that regard, no efforts should be spared in providing adequate provision of social protection services to cushion the impact of abject poverty likely to be experienced in such households.

In conclusion, Zambia remains committed to the 2011 Declaration and will continue to work with all partners and stakeholders to achieve a successful outcome.

Mr. Le Hoai Trung (Viet Nam): First of all, I would like to thank His Excellency Secretary-General Ban Ki-moon for his comprehensive report (A/66/757) on the implementation of the Declaration of the Commitments on HIV/AIDS (resolution S-26/2, annex) and the Political Declaration on HIV/AIDS (resolution 65/277, annex).

Viet Nam aligns itself with the statement made by the representative of Cambodia on behalf of the Association of Southeast Asian Nations.

AIDS remains one of the great challenges of our time, with 34 million people currently living with HIV around the world. During the High-level Meeting on HIV/AIDS that was held in New York in June 2011, the international community reaffirmed HIV and AIDS as "a global emergency and one of the most formidable challenges to the development, progress and stability of our societies and the world at large", thereby embracing the vision of a world with zero new HIV infections, zero discrimination and zero AIDS-related deaths. We share the view expressed by the Secretary-General in his report that the international community has cause for hope and optimism owing to increased access to essential treatment and prevention services, as well as the fact that there has been a decline in new infections and AIDS-related deaths. However, the world is still far from meeting the targets set out in the Political Declaration on HIV/AIDS. Substantial access gaps still persist for key services, with especially difficult obstacles experienced by populations at higher risk. Therefore, we join the efforts and share the responsibility of each and every member of the international community to scaling up their response towards the goal of universal access to comprehensive prevention programmes, treatment, care and support, and towards halting and reversing the spread of the pandemic by 2015. We therefore call upon all stakeholders, especially developed countries, to fulfil their commitments to support national efforts to strengthen the response.

At the High-level Meeting on HIV/AIDS held here in New York last June, the Government of Viet Nam renewed its determination to combat HIV/AIDS and adopted new targets by supporting the Political Declaration on HIV/AIDS. Viet Nam takes those commitments seriously and has adopted concrete measures to realize them. Just recently, Viet Nam finalized its national strategy on HIV/AIDS prevention and control from 2020, with a vision towards 2030. The strategy contains ambitious targets that echo those of the Political Declaration on HIV/AIDS. The National Assembly also passed a national targeted programme on HIV covering the period 2011 to 2015. Among other things, that programme ensures a higher State budget for HIV activities. Another major development was the passing of decree No. 69/2011, of 8 August 2011, on handling administrative violations in health prevention, the medical environment and HIV/AIDS prevention and control.

As the result of those policies and programmes, Viet Nam was initially able to contain the rise of HIV infection, with HI- infected people currently accounting for about 0.26 per cent of the population. In concrete terms, the prevalence among injecting drug users declined from 30 per cent in 2001 and 2002 to 17 per cent in 2010, while the number of HIV/AIDS-related deaths has dropped from more than 6,000 a year to some 2,500 a year for the past two years. In 2011, 49 of 63 provinces had carried out community outreach activities for people who inject drugs and for female sex workers;

60 provinces had implemented some kind of needle and syringe programme; and 57 provinces distributed condoms free of charge. In addition, the national methadone maintenance treatment programme has been expanded to a total of 11 provinces, treating more than 6,900 people in 41 clinics, with an adherence rate of approximately 96 per cent. It is planned to continue to expand the service to 245 clinics in 30 provinces and to 80,000 patients by 2015.

Despite such efforts to address HIV, challenges, such as overlapping policies and sets of measures, the lack of personnel, health facilities, equipment and laboratories, and limited resources for sustainable programmes, still remain and hinder the implementation of HIV intervention. To address those challenges, among other things, Viet Nam will continue to strengthen its political commitment on HIV, to improve the legal framework and regulations, and to scale up efforts to ensure universal access to HIV prevention, treatment, care and support services for all in need. We would like to ensure that HIV prevention and control are mainstreamed into the current system of health service provision, as well as into other sectors and national socio-economic development programmes.

I would like to end my remarks by expressing my sincere appreciation to all United Nations organizations and other development partners for their important ongoing work for the national response in Viet Nam. Through our collective efforts, we are moving closer towards our shared goal of universal access to HIV prevention, treatment and care.

Mr. Tarar (Pakistan): Despite considerable gains in different parts of the world, we are not likely to achieve our shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths in the near future.

The overall thrust of the Secretary-General's latest report (A/66/757) is positive with regard to the number of newly infected persons, including children and adolescents, as well as AIDS-related deaths. Unfortunately, however, that progress varies considerably among countries and regions, and HIV remains the leading cause of death among women of reproductive age at the global level. The current level of international response is unlikely to suffice to meet the 2015 targets reaffirmed in last year's Political Declaration on HIV and AIDS (resolution 65/277, annex). That is a worrisome situation. On the positive side, after four decades of struggle against HIV and AIDS, the international community is better informed and equipped to deal with the threat.

Until recently a low-prevalence country, Pakistan now finds itself in a concentrated phase of the epidemic. Among the key affected populations, people who inject drugs exhibited the highest HIV prevalence, at 27.2 per cent, in 2011. According to the latest national estimates, there are approximately 98,000 cases of HIV/AIDS in Pakistan. The geographic trend of the epidemic is expanding from major urban centres to smaller cities and towns. However, the latest prevalence estimation models indicate that, fortunately, the HIV prevalence among the general adult population is still below 0.1 per cent. That stands us in good stead to contain the epidemic.

The response to the HIV epidemic in Pakistan has been a coordinated effort of the Government, along with bilateral and multilateral donors, the United Nations system and civil society. The national AIDS control programme has come a long way since 1986 to develop into a comprehensive and effective response to the threat of an HIV and AIDS epidemic in Pakistan.

The Government's response was in three five-year phases between 1987 and 2010. However, following the devolution of health care to the provinces in 2011, each province is developing its own provincial AIDS strategy tailored to specific needs. The final document Pakistan AIDS Strategy 2012-2016 will consolidate provincial strategies in line with national health and development priorities and international development goals, including the Millennium Development Goals.

The main goal of the Pakistan AIDS Strategy is to prevent new infections and to improve the health and quality of life of people living with HIV. The programme provides a strategic direction, and its operationalization involves all stakeholders, including non-governmental and community-based organizations.

The majority of AIDS victims live in developing countries. The problem of HIV/AIDS cannot be addressed as a health or human rights issue alone. It has a strong development side. Poverty directly contributes to situations that are conducive to the spread of HIV/AIDS. It also exacerbates lack of access to the medical treatment and social facilities required by victims of HIV/AIDS. Therefore, combating HIV/AIDS and eradicating poverty must go hand in hand. That

cannot be achieved without the active and determined cooperation of the international community.

Less emphasis on profits, new research and information-sharing are necessary to ensuring low-cost drugs. We support the Secretary-General's call for increased global cooperation in order to meet the agreed commitments to universalize access to HIV prevention, treatment care and support. In that regard, the public good should trump corporate interest.

Mr. Rahman (Bangladesh): Let me begin by thanking the Secretary-General for his comprehensive report on the implementation of the Declaration of Commitment on HIV/AIDS (A/66/757), presented this morning. The High-level Meeting held last year provided us with a unique opportunity to review our progress and to make fresh commitments towards achieving a world with zero new HIV infections and zero discrimination and zero AIDS-related deaths (see A/65/PV.95).

It is heartening that access to essential medication for the treatment and prevention of HIV/AIDS has shown a significant increase. In a single decade, the number of people in developing countries receiving antiretroviral therapy has increased by more than twentyfold. The number of people newly infected by that deadly disease is also on the decrease. However, the rate of decrease is still too low to meet the HIV-related Millennium Development Goal target. As the report notes, more than 34 million people are still living with AIDS. Moreover, the achievements are disproportionate among different regions of the world. While some regions witness considerable progress in reducing AIDS-related deaths, some still have much to achieve.

Bangladesh is one of the countries with the lowest prevalence of HIV/AIDS. Since the detection of the first HIV infection in 1989, statistics show that the prevalence of HIV/AIDS in Bangladesh is less than 0.1 per cent. So, in that sense, it is still below the level of an epidemic. That has been possible due to the pragmatic action undertaken by the Government from the very onset.

The Government has taken an evidence-based approach towards HIV and sexually transmitted disease (STD) programming. The National AIDS/STD Programme is the focal point for the coordination, implementation and monitoring of HIV/AIDS programmes in Bangladesh. With the support of development partners, non-governmental organizations and United Nations agencies, the Programme has been undertaking awareness-raising programmes. We have included HIV/AIDS education in the national school curriculums. A number of well-developed strategies/guidelines have been adopted. Last year, the National Strategic Plan for HIV and AIDS 2011-2015 was adopted, providing the framework for a national response to prevent an HIV epidemic.

However, we cannot afford to be complacent. Although it is still considered to be a low-prevalence country, Bangladesh remains vulnerable to an HIV epidemic, given its abject poverty, overpopulation, the high mobility of its population, emigration and so on. Migrant workers remain at risk for HIV infection and thus can be a source of AIDS in our country. Moreover, HIV infection sometimes remains unreported due to the social stigma attached to the disease.

It is rightly pointed out in the Secretary-General's report that achieving a world with zero new infections demands the concerted efforts of all countries, developed and developing alike. It will be impossible to achieve global targets without sufficient financial resources. It is a matter of concern that, just as the international community has committed to intensifying its efforts to eliminate HIV/AIDS, the funding is falling short. We urge our development partners, philanthropic organizations and the corporate sector to come up with more financial and technical support to combat the menace in developing countries.

The Global Fund to Fight AIDS, Tuberculosis and Malaria needs further strengthening. Barriers like intellectual property rights should be eliminated in order to make life-saving medicines affordable. In that connection, we would also like to emphasize the role of faith-based organizations and their leaders in raising awareness of and empathy with those who have been infected with HIV/AIDS. We believe that strong family bonds and social and religious values and ethics should play an important role in fighting the global menace of HIV/AIDS. Thus, through a concerted effort on the part of all stakeholders, the rhetoric of zero new AIDS infections will become a reality.

Mrs. Chikava (Zimbabwe): Zimbabwe aligns itself with the statements made by the representative of Botswana on behalf of the African Group and by the representative of Angola on behalf of the Southern African Development Community. Both statements accurately described the status quo of our regional and subregional efforts to combat the scourge of HIV/AIDS.

I wish to make a few additional remarks on behalf of my country.

Zimbabwe has made progress in pursuing universal access commitments. Over the past few years, we have scaled up our national response to HIV/AIDS, using the specific targets and indicators contained in the universal access declaration for guidance. Accordingly, Zimbabwe's HIV prevalence has continued to decline from a high of over 29 per cent in 1999 to the current 18 per cent. That decline has also been consistent with the decline of the general incidence of HIV. The declines in both areas have been underpinned by expansion of access to HIV prevention services, including, inter alia, prevention of mother-to-child transmission, provision of male and female condoms, HIV testing and counselling, and awareness campaigns. We have recently added male circumcision to our HIV-prevention programmes, based on compelling evidence that, if offered to men and carried out appropriately, the practice has potential HIV-prevention benefits.

Following the adoption of the Political Declaration on HIV/AIDS in 2006 (resolution 60/262), Zimbabwe was one of the first countries in the world to develop and implement an evidence-based behaviour change strategy whose primary result has been the reduction of new cases of HIV. Evidence shows that the behaviour change strategy has contributed to increased demand for and use of HIV-prevention services. To enhance the use of testing and counselling services as a gateway to treatment and care, Zimbabwe has introduced provider-initiated testing and counselling services in all health institutions. That proactive service has made our testing and counselling services user-friendly and robust by enhancing services already provided in the context of voluntary testing and counselling services.

Despite perennial funding challenges, Zimbabwe has recorded significant progress in the provision of treatment and care services. By the end of 2010, Zimbabwe had achieved 77 per cent coverage towards our universal access target, whereby 350,000 of an estimated 593,000 persons requiring antiretroviral therapy were receiving antiretroviral medications. Although there has been progress, it is disheartening and untenable that some people in need of treatment have to delay starting the treatment because the demand for antiretroviral medicine is greater than the supply.

Nevertheless, in pursuit of universal access targets, Zimbabwe has expanded and decentralized treatment services to all districts, including to various rural health centres, opening new antiretroviral therapy sites at all those levels. Regular outreach campaigns penetrating into villages, farming and mining establishments have resulted in an increased use of treatment services, as well as the reduction of stigma and discrimination. In addition, my country has also strengthened coordinated tuberculosis and HIV interventions, whose impact has already been immense in the scaling up of treatment and care services. As part of our commitment to and pursuit of universal access, Zimbabwe has now switched to the use of more efficacious regimens and is slowly phasing out the triple dose regimens whose efficacy have been shown to be comparatively lower.

Zimbabwe salutes all our partners for their assistance in the area of treatment and care. The Global Fund to Fight AIDS, Tuberculosis and Malaria, the Expanded Support Programme, the United States President's Emergency Plan for AIDS Relief, the Children's Investment Fund, the Clinton Health Access Initiative, the Bill & Melinda Gates Foundation and many others have played central roles in enabling Zimbabwe to expand access to treatment and care services.

My country's progress in combating HIV/AIDS is being threatened by the withdrawal of funds by some donors. As we speak today, there is apprehension in my country because at least 66,000 people on antiretroviral drugs risk losing their drug allocations if no steps are taken to redress the funding gap. The gap is also widening because of the introduction of a new treatment regimen. It is known that Zimbabwe devised an innovative national mechanism, the AIDS levy drawn from workers' salaries, to augment the financing of prevention, treatment and care. Even with the national mechanism in place, my country still requires additional financial assistance. We appeal to donors to have a change of heart and continue to fund our HIV/AIDS programme. The consequences of withdrawing funding for treatment will surely be measured in untold suffering of people living with HIV. Most of them have already been made vulnerable by illness and lack of income, and they end up unable to fend for themselves and their families during the course of the illness. Patients might also end up rationing their drugs in an effort to make them last longer, which can result in drug resistance and other complications.

We therefore hope that those partners who have been working with us in combating HIV and AIDS will reconsider their decision to withdraw funding.

The Acting President: We have heard the last speaker in the debate on agenda item 10.

We shall now proceed to consider draft decision A/66/L.49.

The Assembly will now take action on draft decision A/66/L.49 entitled "Implementation of the Declaration of Commitment on HIV/AIDS and the Political Declarations on HIV/AIDS".

May I take it that the Assembly wishes to adopt draft decision A/66/L.49?

The draft decision was adopted.

The Acting President: Before giving the floor to speakers in explanation of position, I would remind delegations that explanations of vote or position are limited to 10 minutes and should be made by delegations from their seats.

Mr. Hassani Nejad Pirkouhi (Islamic Republic of Iran): The Government of the Islamic Republic of Iran remains fully committed to providing the widest possible access without stigma and discrimination to care, treatment and support for people living with HIV/AIDS and their families. However, I would like to put on the record my country's reservation on the decision just adopted and the report of the Secretary-General (A/66/757) and the recommendations contained therein, in particular, paragraph 76 (c).

National laws and regulations have to reflect the ethical, cultural and religious values of a society. Otherwise, they would lose their acceptability and applicability. Furthermore, we have yet to be convinced of the direct link between the revision or elimination of such national laws and regulations that the report asks for and the realization of the goals of the 2011 Political Declaration on HIV/AIDS (resolution 65/277).

The Government of the Islamic Republic of Iran requests that its explanation of position be duly recorded.

The Acting President: May I take it that it is the wish of the General Assembly to conclude its consideration of agenda item 10?

It was so decided.

The meeting rose at 3.55 p.m.

United Nations A/66/PV.117

General Assembly
Sixty-sixth session

Official Records

117th plenary meeting
Thursday, 21 June 2012, 10 a.m.
New York

President: Mr. Al-Nasser ..... (Qatar)

In the absence of the President, Mr. Thomson (Fiji), Vice-President, took the Chair.

The meeting was called to order at 10.15 a.m.

Reports of the Fifth Committee

The Acting President: The General Assembly will now consider the reports of the Fifth Committee under agenda items 129, 131, 132, 134, 141, 146 to 152, 154 to 161 and 163 to 165.

I request the Rapporteur of the Fifth Committee, Mr. Noel González Segura of Mexico, to introduce in one intervention the reports of the Fifth Committee before the Assembly.

Mr. González Segura (Mexico), Rapporteur of the Fifth Committee (*spoke in Spanish*): I have the honour today to present to the General Assembly the reports of the Fifth Committee containing recommendations on issues that required action during the second part of the resumed sixty-sixth session of the General Assembly.

In the course of the second part of the resumed session, which took place between 7 and 31 May and on 12 June, the Fifth Committee held eight formal meetings and numerous informal consultations and informal-informal consultations.

In accordance with resolution 49/233, of 23 December 1994, the second part of the resumed session of the Fifth Committee was devoted primarily to considering the financing of the United Nations peacekeeping missions and associated peacekeeping issues. The Committee considered the financing of 18 peacekeeping missions, as well as other related peacekeeping items and issues.

I would like to draw the Assembly's attention to the fact that the reports of the Fifth Committee contained in documents A/66/540/Add.2, A/66/746/Add.1 and A/66/544/Add.1 have already been considered by the General Assembly, at its 108th and 112th plenary meetings, on 16 May and 4 June, as reflected in documents A/66/PV.108 and A/66/PV.112, respectively.

On agenda item 129, entitled "International residual mechanism for criminal tribunals", in paragraph 6 of its report contained in document A/66/843, the Committee recommends to the General Assembly the adoption of a draft resolution, which the Committee adopted without a vote.

On agenda item 131, entitled "Financial reports and audited financial statements, and reports of the Board of Auditors", in paragraph 7 of its report contained in document A/66/626/Add.1, the Committee recommends to the General Assembly the adoption of a draft resolution, which the Committee adopted without a vote.

On agenda item 134, entitled "Programme budget for the biennium 2012-2013", in paragraphs 13 and 14 of its report contained in document A/66/637/Add.2, the Committee recommends to the General Assembly the adoption, respectively, of a draft resolution and a draft decision, which the Committee adopted without a vote.

This record contains the text of speeches delivered in English and of the interpretation of speeches delivered in the other languages. Corrections should be submitted to the original languages only. They should be incorporated in a copy of the record and sent under the signature of a member of the delegation concerned to the Chief of the Verbatim Reporting Service, room U-506. Corrections will be issued after the end of the session in a consolidated corrigendum.

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On agenda item 141, entitled "United Nations common system", in paragraph 7 of its report contained in document A/66/644/Add.1, the Committee recommends to the General Assembly the adoption of a draft resolution, which the Committee adopted without a vote.

On agenda item 146, entitled "Administrative and budgetary aspects of the financing of the United Nations peacekeeping operations", in paragraph 10 of its report contained in document A/66/834, the Committee recommends to the General Assembly the adoption of the following three draft resolutions: draft resolution I, entitled "Cross-cutting issues"; draft resolution II, entitled "Support account for peacekeeping operations"; and draft resolution III, entitled "Financing of the United Nations Logistics Base at Brindisi, Italy"; all of which the Committee adopted without a vote.

With regard to the draft resolutions on the financing of peacekeeping operations, I should like to inform the Assembly that, with the exception of sub-item (b), entitled "Financing of the United Nations Interim Force in Lebanon", of agenda item 160, the Committee adopted all the draft resolutions without a vote.

The reports of the Fifth Committee are presented under the following agenda items: agenda item 147, "Financing of the United Nations Interim Security Force for Abyei", as contained in document A/66/632/Add.1; agenda item 148, "Financing of the United Nations Mission in the Central African Republic and Chad", as contained in document A/66/841; agenda item 149, "Financing of the United Nations Operation in Côte d'Ivoire", as contained in document A/66/633/Add.1; agenda item 150, "Financing of the United Nations Peacekeeping Force in Cyprus", as contained in document A/66/835; agenda items 151 and 152, "Financing of the United Nations Organization Mission in the Democratic Republic of the Congo" and "Financing of the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo", as contained in document A/66/584/Add.1; agenda item 154, "Financing of the United Nations Integrated Mission in Timor-Leste", as contained in document A/65/839; agenda item 155, "Financing of the United Nations Mission in Ethiopia and Eritrea", as contained in document A/66/842; agenda item 156: "Financing of the United Nations Observer Mission in Georgia", as contained in document A/66/832; agenda item 157, "Financing of the United Nations Stabilization Mission in Haiti", as contained in document A/66/846; agenda item 158, "Financing of the United Nations Interim Administration Mission in Kosovo", as contained in document A/66/845; agenda item 159, "Financing of the United Nations Mission in Liberia", as contained in document A/66/838; sub-item (a) of agenda item 160, "Financing of the United Nations peacekeeping forces in the Middle East: United Nations Disengagement Observer Force", as contained in document A/66/840; agenda item 161, "Financing of the United Nations Mission in South Sudan", as contained in document A/66/634/Add.1; agenda item 163, "Financing of the United Nations Mission for the Referendum in Western Sahara", as contained in document A/66/836; agenda item 164, "Financing of the African Union-United Nations Hybrid Operation in Darfur", as contained in document A/66/837; and agenda item 165, "Financing of the activities arising from Security Council resolution 1863 (2009)", as contained in document A/66/844.

Regarding sub-item (b), entitled "United Nations Interim Force in Lebanon", of agenda item 160, entitled "Financing of the United Nations peacekeeping forces in the Middle East", the report of the Fifth Committee is contained in document A/66/833. The Committee considered the draft resolution as amended and decided to retain the fourth preambular paragraph and existing paragraphs 4, 5 and 13 by a single recorded vote. In paragraph 13 of that report, the Committee recommends to the General Assembly the adoption of the draft resolution, as amended, as a whole, which the Committee also adopted by a recorded vote.

Finally, under agenda item 132, entitled "Review of the efficiency of the administrative and financial functioning of the United Nations", in paragraph 5 of its report contained in document A/66/638/Add.2, the Committee recommends to the General Assembly the adoption of the draft decision relating to questions deferred for future consideration. The Committee adopted the proposal without a vote.

Before I conclude, allow me again to thank delegations for their cooperation in the conduct of the Committee's work. Through its hard work, the membership demonstrated its commitment to reach agreement on technically and politically complex items. I also wish to thank delegations for their commitment and wholehearted support with a view to the peacekeeping work of the Organization.

On behalf of all delegations, I would also like to thank the Chair of the Fifth Committee, Ambassador

Michel Tommo Monthe of Cameroon. His energy and wisdom were key in our attaining the positive results of our work. Allow me to also mention my colleagues on the Bureau, namely, Ms. Mariam Saif Abdulla Al-Shamisi of the United Arab Emirates, Ms. Jelena Plakalović of Serbia, and Mr. Paul Ballantyne of New Zealand. They consistently displayed their professionalism and commitment to the work of the Committee. I also wish to recognize here each and every member of the Secretariat team servicing the Fifth Committee, headed by Ms. Sharon Van Buerle, for their dedication and great efficiency. I also wish to thank our colleagues who are leaving the Committee to perform new functions and I wish them every success.

Lastly, allow me to add that the work of the Fifth Committee is hard but worthwhile when we see the results in the improvement of the Organization's proceedings and when we are certain that it is adequately financed in order to carry out its mandates with a view to strengthening it and reinforcing the importance and the relevance of the United Nations as the primary world forum.

The Acting President: I thank the Rapporteur of the Fifth Committee.

If there is no proposal under rule 66 of the rules of procedure, I shall take it that the General Assembly decides not to discuss the reports of the Fifth Committee that are before the Assembly today.

It was so decided.

The Acting President: Statements will therefore be limited to explanations of vote.

The positions of delegations regarding the recommendations of the Fifth Committee have been made clear in the Committee, and are reflected in the relevant official records.

May I remind members that under paragraph 7 of decision 34/401, the General Assembly agreed that

> "When the same draft resolution is considered in a Main Committee and in plenary meeting, a delegation should, as far as possible, explain its vote only once, that is, either in the Committee or in plenary meeting, unless that delegation's vote in plenary meeting is different from its vote in the Committee."

May I further remind delegations that, also in accordance with General Assembly decision 34/401, explanations of vote are limited to 10 minutes and should be made by delegations from their seats.

Before we begin to take action on the recommendations contained in the reports of the Fifth Committee, I should like to advise representatives that we are going to proceed to take decisions in the same manner as was done in the Fifth Committee, unless notified otherwise in advance. That means that where recorded votes were taken, we will do the same. I should also hope that we will proceed to adopt without a vote those recommendations that were adopted without a vote in the Committee.

Agenda item 129 (*continued*)

International residual mechanism for criminal tribunals

Report of the Fifth Committee (A/66/843)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report. The Assembly will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/240 B).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 129.

Agenda item 131 (*continued*)

Financial reports and audited financial statements, and reports of the Board of Auditors

Report of the Fifth Committee (A/66/626/Add.1)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 7 of its report. We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 232 B).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 131.

Agenda item 134 (*continued*)

Proposed programme budget for the biennium 2012-2013

Report of the Fifth Committee (A/66/637/Add.2)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 13 of its report and one draft decision recommended by the Committee in paragraph 14 of the same report. The Assembly will now take action on the draft resolution and the draft decision.

The draft resolution is entitled "Special subjects relating to the programme budget for the biennium 2012-2013". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/258 B).

The Acting President: The draft decision is entitled "Subvention to the Special Court for Sierra Leone". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft decision was adopted.

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 134.

Agenda item 141 (*continued*)

United Nations common system

Report of the Fifth Committee (A/66/644/Add.1)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 7 of its report.

We will now take a decision on the draft resolution entitled "United Nations common system". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/263).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 141.

Agenda item 146

Administrative and budgetary aspects of the financing of the United Nations peacekeeping operations

Report of the Fifth Committee (A/66/834)

The Acting President: The Assembly has before it three draft resolutions recommended by the Fifth Committee in paragraph 10 of its report.

We will now take a decision on draft resolutions I, II and III.

Draft resolution I is entitled "Cross-cutting issues". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

Draft resolution I was adopted (resolution 66/264).

The Acting President: Draft resolution II is entitled "Support account for peacekeeping operations". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

Draft resolution II was adopted (resolution 66/265).

The Acting President: Draft resolution III is entitled "Financing of the United Nations logistics base at Brindisi, Italy". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

Draft resolution III was adopted (resolution 66/266).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 146.

Agenda item 147 (*continued*)

Financing of the United Nations Interim Security Force for Abyei

Report of the Fifth Committee (A/66/632/Add.1)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

The Assembly will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?-

The draft resolution was adopted (resolution 66/241 B).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 147.

Agenda item 148

Financing of the United Nations Mission in the Central African Republic and Chad

Report of the Fifth Committee (A/66/841)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/267).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 148.

Agenda item 149 (*continued*)

Financing of the United Nations Operation in Côte d'Ivoire

Report of the Fifth Committee (A/66/633/Add.1)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

The Assembly will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

The draft resolution was adopted (resolution 66/242 B).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 149.

Agenda item 150

Financing of the United Nations Peacekeeping Force in Cyprus

Report of the Fifth Committee (A/66/835)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

The Assembly will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/268).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 150.

Agenda items 151 and 152 (*continued*)

Financing of the United Nations Organization Mission in the Democratic Republic of the Congo

Financing of the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo

Report of the Fifth Committee (A/66/584/Add.1)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

The Assembly will now take a decision on the draft resolution, entitled "Financing of the United Nations Organization Mission in the Democratic Republic of the Congo and of the United Nations Organization Stabilization Mission in the Democratic Republic of the Congo". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

The draft resolution was adopted (resolution 66/269).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda items 151 and 152.

Agenda item 154

Financing of the United Nations Integrated Mission in Timor-Leste

Report of the Fifth Committee (A/66/839)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/270)

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 154.

Agenda item 155

Financing of the United Nations Mission in Ethiopia and Eritrea

Report of the Fifth Committee (A/66/842)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/271).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 155.

Agenda item 156

Financing of the United Nations Observer Mission in Georgia

Report of the Fifth Committee (A/66/832)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 5 of its report.

We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

The draft resolution was adopted (resolution 66/272).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 156.

Agenda item 157

Financing of the United Nations Stabilization Mission in Haiti

Report of the Fifth Committee (A/66/846)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/273).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 157.

Agenda item 158

Financing of the United Nations Interim Administration Mission in Kosovo

Report of the Fifth Committee (A/66/845)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report. The Assembly will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

The draft resolution was adopted (resolution 66/274).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 158.

Agenda item 159

Financing of the United Nations Mission in Liberia

Report of the Fifth Committee (A/66/838)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report. We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/275).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 159.

Agenda item 160

Financing of the United Nations peacekeeping forces in the Middle East

(a) United Nations Disengagement Observer Force

Report of the Fifth Committee (A/66/840)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take a decision on the draft resolution entitled "Financing of the United Nations Disengagement Observer Force". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/276).

The Acting President: The Assembly has thus concluded this stage of its consideration of sub-item (a) of agenda item 160.

(b) United Nations Interim Force in Lebanon

Report of the Fifth Committee (A/66/833)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 13 of its report. We will now take a decision on the draft resolution, entitled "Financing of the United Nations Interim Force in Lebanon". A single separate vote has been requested on the fourth preambular paragraph and operative paragraphs 4, 5 and 13 of the draft resolution.

I shall now put to the vote the fourth preambular paragraph and operative paragraphs 4, 5 and 13, on which a single separate and recorded vote has been requested.

A recorded vote was taken.

In favour:

Afghanistan, Algeria, Angola, Antigua and Barbuda, Argentina, Armenia, Bahamas, Bahrain, Bangladesh, Barbados, Belarus, Benin, Bolivia (Plurinational State of), Brazil, Brunei Darussalam, Burkina Faso, Cambodia, Chad, Chile, China, Colombia, Comoros, Congo, Costa Rica, Cuba, Democratic People's Republic of Korea, Djibouti, Dominican Republic, Ecuador, Egypt, El Salvador, Eritrea, Ethiopia, Ghana, Grenada, Guatemala, Guinea, Guinea-Bissau, Guyana, Honduras, India, Indonesia, Iran (Islamic Republic of), Iraq, Jamaica, Jordan, Kazakhstan, Kuwait, Lao People's Democratic Republic, Lebanon, Liberia, Libya, Malaysia, Mali, Mauritania, Mauritius, Mexico, Morocco, Mozambique, Myanmar, Namibia, Nepal, Nicaragua, Niger, Nigeria, Oman, Pakistan, Paraguay, Peru, Philippines, Qatar, Russian Federation, Saint Vincent and the Grenadines, Saudi Arabia, Senegal, Singapore, Somalia, South Africa, Sri Lanka, Sudan, Suriname, Syrian Arab Republic, Thailand, Timor-Leste, Togo, Trinidad and Tobago, Tunisia, Turkey, Uganda, United Arab Emirates, United Republic of Tanzania, Uruguay, Vanuatu, Venezuela (Bolivarian Republic of), Viet Nam, Zambia, Zimbabwe

Against:

Canada, Israel, United States of America

Abstaining:

Albania, Andorra, Australia, Austria, Belgium, Bosnia and Herzegovina, Bulgaria, Cameroon, Côte d'Ivoire, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Japan, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Monaco, Montenegro, Netherlands, New Zealand, Norway, Panama, Poland, Portugal, Republic of Korea, Republic of Moldova, Romania, San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, the former Yugoslav Republic of Macedonia, Ukraine, United Kingdom of Great Britain and Northern Ireland

The fourth preambular paragraph and operative paragraphs 4, 5 and 13 of the draft resolution were retained by 97 votes to 3, with 49 abstentions.

The Acting President: I shall now put to the vote the draft resolution as a whole. A recorded vote has been requested.

A recorded vote was taken.

In favour:

Afghanistan, Albania, Algeria, Andorra, Angola, Antigua and Barbuda, Argentina, Armenia, Australia, Austria, Bahamas, Bahrain, Bangladesh, Barbados, Belarus, Belgium, Benin, Bolivia (Plurinational State of), Bosnia and Herzegovina, Brazil, Brunei Darussalam, Bulgaria, Burkina Faso, Cambodia, Cameroon, Chad, Chile, China, Colombia, Comoros, Congo, Costa Rica, Côte d'Ivoire, Croatia, Cuba, Cyprus, Czech Republic, Democratic People's Republic of Korea, Denmark, Djibouti, Dominican Republic, Ecuador, Egypt, El Salvador, Eritrea, Estonia, Ethiopia, Finland, France, Germany, Ghana, Greece, Grenada, Guatemala, Guinea, Guinea-Bissau, Guyana, Honduras, Hungary, Iceland, India, Indonesia, Iran

(Islamic Republic of), Iraq, Ireland, Italy, Jamaica, Japan, Jordan, Kazakhstan, Kuwait, Lao People's Democratic Republic, Latvia, Lebanon, Liberia, Libya, Liechtenstein, Lithuania, Luxembourg, Madagascar, Malaysia, Mali, Malta, Mauritania, Mauritius, Mexico, Monaco, Montenegro, Morocco, Mozambique, Myanmar, Namibia, Nepal, Netherlands, New Zealand, Nicaragua, Niger, Nigeria, Norway, Oman, Pakistan, Panama, Paraguay, Peru, Philippines, Poland, Portugal, Qatar, Republic of Korea, Republic of Moldova, Romania, Russian Federation, Saint Vincent and the Grenadines, San Marino, Saudi Arabia, Senegal, Serbia, Singapore, Slovakia, Slovenia, Somalia, South Africa, Spain, Sri Lanka, Sudan, Suriname, Sweden, Syrian Arab Republic, Thailand, the former Yugoslav Republic of Macedonia, Timor-Leste, Trinidad and Tobago, Tunisia, Turkey, Uganda, Ukraine, United Arab Emirates, United Kingdom of Great Britain and Northern Ireland, United Republic of Tanzania, Uruguay, Vanuatu, Venezuela (Bolivarian Republic of), Viet Nam, Zambia, Zimbabwe

Against:

Canada, Israel, United States of America

The draft resolution, as a whole, was adopted by 145 votes to 3 (resolution 66/277).

The Acting President: I shall now give the floor to the representative of the Syrian Arab Republic to speak in explanation of vote or position on the resolutions just adopted.

Mr. Ayzouki (Syrian Arab Republic) (*spoke in Arabic*): My delegation joined the consensus on the adoption of resolution 66/276 on the financing of the United Nations Disengagement Observer Force and voted in favour of resolution 66/277 on the financing of the United Nations Interim Force in Lebanon. Our position in based on our consistent support for the principle that the responsibility for financing those two forces should be borne by Israel, the aggressor and the occupying Power, which caused their establishment n the first place. Our position is in conformity with the basic principles contained in resolution 1874 (S-IV), of 27 June 1963.

The Acting President: The General Assembly has thus concluded this stage of its consideration of sub-item (b) of agenda item 160.

Agenda item 161 (*continued*)

Financing of the United Nations Mission in South Sudan

Report of the Fifth Committee (A/66/634/Add.1)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report. The Assembly will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

The draft resolution was adopted (resolution 66/243 B).

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 161.

Agenda item 163

Financing of the United Nations Mission for the Referendum in Western Sahara

Report of the Fifth Committee (A/66/836)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report. We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote.

May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/278)

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 163.

Agenda item 164

Financing of the African Union-United Nations Hybrid Operation in Darfur

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take a decision on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/279).

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 164.

Agenda item 165

Financing of the activities arising from Security Council resolution 1863 (2009)

Report of the Fifth Committee (A/66/844)

The Acting President: The Assembly has before it a draft resolution recommended by the Fifth Committee in paragraph 6 of its report.

We will now take action on the draft resolution. The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do the same?

The draft resolution was adopted (resolution 66/280).

The Acting President: I now give the floor to the representative of Denmark, who wishes to speak in explanation of position on the resolution just adopted.

Mr. Juul-Nyholm (Denmark): I have the honour to speak on behalf of the member States of the European Union (EU).

While the EU Member States are pleased that funding has been agreed for the next 12 months for the United Nations Support Office for the African Union Mission in Somalia (UNSOA), We would nonetheless like to emphasize our position of principle on reimbursement for troop-related costs. The 27 EU member States firmly believe that it is a matter of principle that there should be no backdating of payments of troop costs and contingent-owned equipment before the actual integration of any forces under the command of the African Union. In the specific case of UNSOA, no payment should therefore be made before the date of signature of the memorandum of understanding between the African Union and the troop-contributing country. We also strongly believe that the number of troops should be verified before any payment is made.

The Acting President: The General Assembly has thus concluded this stage of its consideration of agenda item 165.

Agenda item 132 (*continued*)

Review of the efficiency of the administrative and financial functioning of the United Nations

Report of the Fifth Committee (A/66/638/Add.2)

The Acting President: The Assembly has before it a draft decision recommended by the Committee in paragraph 5 of its report.

The Assembly will now take action on the draft decision, entitled "Questions deferred for future consideration". The Fifth Committee adopted it without a vote. May I take it that the Assembly wishes to do likewise?

The draft decision was adopted.

The Acting President: The Assembly has thus concluded this stage of its consideration of agenda item 132.

On behalf of the General Assembly, I would like to thank His Excellency Mr. Michel Tommo Monthe, Permanent Representative of Cameroon to the United Nations and Chairman of the Fifth Committee, the members of the Bureau and representatives for a job well done.

The General Assembly has thus concluded its consideration of all the reports of the Fifth Committee before it.

The meeting rose at 10.55 a.m.

United Nations A/66/PV.118

General Assembly
Sixty-sixth session

Official Records

118th plenary meeting
Thursday, 28 June 2012, 10 a.m.
New York

President: Mr. Al-Nasser ..... (Qatar)

The meeting was called to order at 10.35 a.m.

Tribute to the memory of His Royal Highness Prince Nayef Bin Abdulaziz Al-Saud, Crown Prince of Saudi Arabia

The President: Before we proceed to the items on our agenda, I would like to take the opportunity to pay my respects on the passing away of His Royal Highness Prince Nayef Bin Abdulaziz Al-Saud, Crown Prince of Saudi Arabia. It was with profound sadness and heartfelt grief that we learned of the passing away of His Royal Highness.

On my own behalf and on behalf of the States Members of the United Nations, I would like to extend my deepest condolences to the Royal Family and to the Government and people of Saudi Arabia.

Agenda item 14 (*continued*)

Integrated and coordinated implementation of and follow-up to the outcomes of the major United Nations conferences and summits in the economic, social and related fields

Draft resolution (A/66/L.48/Rev.1)

The President: Members will recall that at its 72nd plenary meeting, on 2 December 2011, the General Assembly held a debate on agenda item 14 jointly with agenda item 117, agenda item 123 and its sub-item (a), and agenda item 124.

It is a particular honour and pleasure for me to introduce to the General Assembly this draft resolution as a text of the President on behalf of the Member States. I was very encouraged by the two-day high-level event organized at the United Nations this past April devoted to happiness. In my statement at that meeting, I underscored the need for a more inclusive, equitable and balanced approach that will promote sustainability, eradicate poverty and enhance well-being and happiness. In that context, I intended to take the initiative to follow up on resolution 65/309, of 19 July 2011, which recognized that the pursuit of happiness is a fundamental human goal. The same resolution invited us to elaborate measures that better capture the importance of the pursuit of happiness and well-being in human development.

I believe that the proclamation of an International Day of Happiness by the General Assembly, to be observed every year with the full participation of the international community as a whole, would be a forward-looking way of focusing on the value of happiness as a universal goal and aspiration in the lives of all.

The choice of the date 20 March as the International Day of Happiness has the general support of all. As a day of equinox, it is a day of special planetary and global significance. That date would also be more convenient for all, including civil society, to join in the celebration of the Day by the United Nations.

The Assembly will now take a decision on draft resolution A/66/L.48/Rev.1, entitled "International Day of Happiness".

This record contains the text of speeches delivered in English and of the interpretation of speeches delivered in the other languages. Corrections should be submitted to the original languages only. They should be incorporated in a copy of the record and sent under the signature of a member of the delegation concerned to the Chief of the Verbatim Reporting Service, room U-506. Corrections will be issued after the end of the session in a consolidated corrigendum.

12-39301 (E)

Please recycle

May I take it that the Assembly decides to adopt draft resolution A/66/L.48/Rev.1?

Draft resolution A/66/L.48/Rev.1 was adopted (resolution 66/281).

The President: I now give the floor to the representative of Bhutan.

Mrs. Namgyel (Bhutan): To lead a happy life is the aspiration of every human being; it may be the ultimate purpose of life. Yet it is becoming abundantly clear that our policies and actions are not only out of sync with that fundamental goal, but they are beginning to undermine the very foundations of our collective security and survival. We urgently need to change course and adopt a new paradigm.

Inspired by that belief, my delegation initiated a draft resolution entitled "Happiness: towards a holistic approach to development", which the General Assembly adopted by consensus in July 2011 (resolution 65/309). Pursuant to that resolution, my Government was honoured to host, on 2 April here in New York, a high-level meeting on the theme "Well-being and happiness: defining a new economic paradigm".

The Prime Minister of Bhutan has often stated the following:

> "One common use of the word happiness is to denote an ephemeral, passing mood — happy today or unhappy tomorrow — due to some temporary external condition like praise or blame, gain or loss. However, happiness can also refer to a deep, abiding state that comes from living life in full harmony with the natural world, with our communities and fellow beings, and with our culture and spiritual heritage — in short, from feeling totally connected with our world."

The need of the hour is for all of us — big and small, rich and poor — to take steps that will help transcend our differences and unite us, so that we may experience a richer connection with each other and with our world.

It is therefore with a deep sense of satisfaction that my delegation welcomes the President's noble initiative to proclaim 20 March as the International Day of Happiness. Resolution 66/281, just adopted by the General Assembly, truly captures the essence of our universal goal.

I am confident that the President's initiative will encourage Member States to pursue policies that will enhance the happiness and well-being of their citizens in a peaceful and secure environment.

Allow me, therefore, to pledge my delegation's full and unconditional support for resolution 66/281, which proclaims 20 March as the International Day of Happiness. I request and encourage all Member States to also do so in a timely manner.

The President: The General Assembly has thus concluded this stage of its consideration of agenda item 14.

Agenda item 118 (*continued*)

The United Nations Global Counter-Terrorism Strategy

Reports of the Secretary-General (A/66/762 and A/66/762/Add.1)

Draft resolution (A/66/L.53)

The President: In connection with this item, members will recall that the Assembly adopted resolutions 66/10 and 66/12 at its 60th and 61st plenary meetings, respectively, on 18 November 2011.

The Assembly now has before it the reports of the Secretary-General contained in documents A/66/762 and A/66/762/Add.1, and a draft resolution issued as document A/66/L.53.

Today's meeting serves to undertake an examination of the reports of the Secretary-General and of the implementation of the Global Counter-Terrorism Strategy by Member States, and to consider updating the Strategy to respond to change, in accordance with resolution 64/297, of 8 September 2010.

We have come together today at the third review of the United Nations Global Counter-Terrorism Strategy in accordance with resolution 64/297. I welcome representatives of the States Members of the United Nations and their counter-terrorism focal points who have joined us at this important meeting. Member States have been presented with the report of the Secretary-General entitled "United Nations Global Counter-Terrorism Strategy: activities of the United Nations system in implementing the Strategy". The report contains five recommendations, which are relevant to our discussions today.

The United Nations Global Counter-Terrorism Strategy is a watershed document in the international

community's fight against terrorism in all its forms and manifestations. The Strategy is comprehensive in scope, preventive in nature and integrated in approach. It was adopted by consensus by all Member States in 2006 and signifies universal condemnation of all acts of terrorism.

The Strategy is a unique policy framework. It is a significant achievement of the international community and shows the goodwill and ability of the international community to come together even when faced with difficult choices. Its four pillars cover all the issues that are necessary for an effective global fight against terrorism.

The time has come for a more effective implementation of the Strategy. It is my hope that this third review of the Strategy will provide the necessary momentum towards its full implementation on the ground. During the Secretary-General's Symposium on International Counter-Terrorism Cooperation, held in September 2011, I reiterated the resolve of Member States to implement the Strategy, especially through enhanced regional cooperation. In fact, the Secretary-General's Symposium as a whole highlighted the importance of regional strategies against terrorism.

I wish to take this opportunity to underscore the importance of regional cooperation in our counter-terrorism efforts. Several regions around the world have demonstrated the advantages of bringing regional cooperation to counter-terrorism activities. We need to learn from those experiences and see how we can use improved regional collaboration to strengthen counter-terrorism work, both at the national and international levels. In short, multinational efforts that go beyond traditional and localized approaches are required.

No nation acting alone, no matter how powerful, can prevent every threat from being carried out. In the Strategy, all four pillars are important for proper implementation, but I wish to stress that two pillars, pillars I and IV, deserve equal emphasis as we engage in our counter-terrorism activities.

Yesterday, my Office organized a thematic discussion on the importance of promoting dialogue and understanding and countering the appeal of terrorism, which is an essential element of pillar I of the Strategy. During the thematic discussion, among other initiatives and structures, I mentioned the critical role being played by the United Nations Alliance of Civilizations in fostering mutual understanding around the world. With more cohesive, tolerant and resilient societies, we can deny terrorists the space and the profile they need to spread their narratives and campaigns. Similarly, protecting human rights and countering terrorism are two complementary issues that remain important responsibilities for all States.

In our efforts to stamp out terrorism we must not abandon our principles and values for the protection of the life, property and dignity of all citizens. We need to take action with respect to our resolve concerning pillar IV of the Strategy. One way to achieve this is to make progress in promoting the rights of victims of terrorism and other forms of political violence. It is our moral obligation to do so. It is also a pragmatic way of delegitimizing terrorist violence by exposing the horrors that such violence causes.

I would like to express my appreciation to Ambassador Guillermo Rishchynski, the Permanent Representative of Canada, who has been willing to undertake the important responsibility of serving as a facilitator for consultation with Member States, and I thank him for the work he has done in producing an outcome document.

In conclusion, I invite representatives to give their views on how we can make progress on the implementation of the Global Counter-Terrorism Strategy. The Strategy is the cornerstone of our international counter-terrorism framework. Our resolve is strong, but it requires action and results. Only through strong political will and by implementation and delivery can we realize our hopes of a world free of terrorism.

Mr. Baird (Canada): As we gather to renew our multilateral commitment to fighting terrorism, we are mindful of a powerful monument that stands just 5 kilometres from this very Hall. I am referring to Ground Zero, site of the single deadliest terrorist attack in world history. As I said in my address to the General Assembly last fall, the events of 11 September 2001 were a stark reminder that evil exists, that life is fragile, that freedom has enemies and that the poison of radical terrorism is all too real.

While fascism and communism were the great challenges of previous generations, terrorism is the great challenge of ours. No country is immune from this threat. Nor can any country ignore this challenge. From the truck bombings in Iraq, to the Cinema Rex

arson in Abadan, Iran, to the Beslan school massacre in the Russian Federation, to the mid-air destruction of Air India flight 182, to the synchronized Mumbai bombings of 1993, the most deadly attacks in our history demonstrate that terrorism observes no boundaries, respects no civilians and favours no regions.

It is with sadness and no sense of pride that I convey Canada's first-hand experience with the brutality of terrorism. The 1985 Air India bombing to which I referred was planned and executed on our soil and killed 280 Canadians. On 9/11, 24 Canadians tragically lost their lives. Because Canada is a nation enriched by the contributions of immigrants from all over the world, from other lands, no matter where in the world a terror attack occurs, the pain is felt and shared by Canadian families and friends.

Canada defines terrorism as intentionally causing serious harm to intimidate the public with respect to its security, or to pressure a person, Government or organization for political, religious or ideological purposes.

Political, religious or ideological causes are not terrorism. But using violence in support of politics, religion or ideology is terrorism. I make this point to underscore the fact that terrorist acts are never justified, regardless of the cause and no matter how legitimate the grievance. In this regard, it is telling that the United Nations of the world have come together to condemn terrorism in clear and unambiguous terms.

The 2006 United Nations Global Counter-Terrorism Strategy (see resolution 60/288, annex) employs prose that is categorical and absolute:

> "We, the States Members of the United Nations, resolve:
>
> "1. To consistently, unequivocally and strongly condemn terrorism in all its forms and manifestations, committed by whomever, wherever and for whatever purposes, as it constitutes one of the most serious threats to international peace and security."

It is said that pragmatic vagueness is the language of diplomacy. Solutions to the issues before the General Assembly are often sketched not in black and white, but, rather, in shades of grey. The same cannot be said of our resolve against terrorism. It is not fuzzy or ambiguous. The words are clear as crystal: "in all its forms and manifestations, committed by whomever, wherever and for whatever purposes".

Far too often, the international news media refuse to the use the word "terrorist", in the naive and mistaken belief that to report violence as a terrorist act is to cast judgement on the perpetrators' cause. By pretending that everything is relative, these news media deny the very existence of terrorism. Terrorism is not a political or a religious cause. Terrorism is using violence against civilian, police and military targets to pursue that cause. According to the United Nations Global Strategy, committing such acts is terrorism regardless of who commits them or where and for what purposes they are committed.

In the same vein, the teachings of the great Mohandas Gandhi remind us that we must not confuse the righteousness of a cause with the use of terrorist violence to advance that cause. The Mahatma wrote, "Truth can never be propagated by doing violence". Canada welcomed the adoption of the United Nations Counter-Terrorism Strategy in September 2006, and I am pleased to renew our commitment to it today.

Canada embraces the four pillars of the United Nations Strategy, specifically: addressing the conditions that spread terrorism; preventing and combating terrorism; capacity-building; and respect for human rights and the rule of law.

Member States are primarily responsible for implementing this important strategy. Canada has made significant progress in doing so, both at home and around the world. This year, in February, the Government of Canada released its formal counter-terrorism strategy. Canada's strategy is based on four reinforcing elements: prevent, detect, deny and respond.

The first pillar of the United Nations Global Counter-Terrorism Strategy corresponds to the first element of the Canadian strategy, which is to prevent individuals from engaging in terrorism.

We are working to make Canadian communities more resilient against violent extremism and radicalization. We will not hesitate to challenge and counter violent extremist ideology. We intend to reduce the risk of individuals succumbing to violent extremism and radicalization. Our Government is also investing significantly in research on terrorism and counter-terrorism, such as how to prevent and counter violent extremism.

Further to the second pillar of the United Nations Strategy, preventing and combating terrorism,

Canada is taking many concrete steps. These include adopting domestic laws to implement and give effect to the 12 United Nations conventions and protocols on Terrorism to which Canada is proud to be a party; an asset freeze, travel ban and arms embargo on individuals and organizations identified as supporting or being associated with terrorism; a new law that allows the victims of terrorism to sue the perpetrators and supporters of terrorism, including those States that support it; criminal law amendments to give law enforcement officers the tools that they need to respond effectively to terrorism and to address nuclear terrorism better; a cybersecurity strategy for Canada; and investing in enhanced security for air travel and air cargo.

Currently, the Canadian Parliament is reviewing the Nuclear Terrorism Act. Once it has been enacted, that will put Canada in a position to ratify both the International Convention for the Suppression of Acts of Nuclear Terrorism and the Amendments to the Convention on the Physical Protection of Nuclear Materials.

Terrorism is a global phenomenon; it knows no borders. An effective response to terrorism must be equally global and leave no gaps for terrorists to exploit. That is why pillar III of the United Nations Strategy — developing State capacity to prevent and combat terrorism — is absolutely vital. Canada's Counter-Terrorism Capacity Building Program provides other countries with training, equipment, technical, legal and other security assistance and expertise to help them prevent and respond to terrorist activities. We give other countries the training and equipment they need to enable law enforcement agencies to share information and launch investigations, enhance border security and stop terrorist groups from utilizing funds to finance attacks around the world.

To that end, I am pleased to confirm that Canada, through its Counter-Terrorism Capacity Building Program, will be contributing up to an additional $8 million in support of capacity-building projects that aim to enhance counter-terrorism cooperation globally. We attach great value to the recent creation of the Global Counterterrorism Forum (GCTF), an action-oriented coordination forum that mobilizes commitment and capacity to combat terrorism and strengthen international counter-terrorism cooperation. Canada is pleased to act as co-Chair, along with Algeria, of the Sahel Working Group within the GCTF. Working Group members are bringing together experts to build networks across borders, share best practices and enhance skill sets for detecting and combating terrorism.

We have also renewed Canada's Global Partnership Program, which helps combat the threat of nuclear, radiological, biological and chemical terrorism. As Prime Minister Stephen Harper said when he announced its renewal at the Nuclear Security Summit in Seoul,

> "Canada's Global Partnership Program is essential to the international effort to combat nuclear terrorism and to prevent weapons of mass destruction and related materials from falling into the wrong hands."

All of our partnerships allow us to strengthen our counter-terrorism efforts and to share best practices.

The final pillar of the United Nations Counter-Terrorism Strategy, respect for human rights and the rule of law, echoes Canada's own principles. Canadian society is built on the rule of law as a cornerstone of peace, order and good Government. It follows that all counter-terrorism activities must adhere to the rule of law. Government institutions must act within legal mandates while countering terrorism. Upholding the rule of law includes adherence to international and domestic legal obligations to protect human rights. The respect for, and promotion of, human rights are core Canadian values.

But security is also a human right. Terrorism is an attack on those very rights that are fundamental to our society, such as freedom of thought, freedom of expression and association, and a person's right to life, liberty and security. Belief in human rights is fundamental. It governs policy choices and decision-making, and it governs standards in investigations. While our capacity to counter threats on all fronts has increased significantly over the past decade, the threat of terrorism persists and evolves. So the fight against terrorism continues and must also evolve. In this ongoing struggle, it is important for the nations and citizens of the world to keep faith. We must maintain hope that we will prevail. No matter how dark the storm clouds of terror and violence, let us remember the confidence with which John F. Kennedy approached this very challenge. Speaking to the Assembly back in 1961, President Kennedy shared the certain knowledge that terrorism will not succeed:

> "Terror is not a new weapon. Throughout history it has been used by those who could not prevail, either by persuasion or example. But inevitably they fail, either because men are not afraid to die for a life worth living, or because the terrorists themselves came to realize that free men cannot be frightened by threats, and that aggression would meet its own response."

I thank the President of the Assembly for the opportunity to address today's meeting. I want to reaffirm Canada's commitment to working with Member States, the Counter-Terrorism Committee Executive Directorate, the Counter-Terrorism Implementation Task Force and the relevant United Nations agencies towards the full and timely implementation of this incredibly important Strategy.

Mr. Ja'afari (Syrian Arab Republic): I have the honour to speak on behalf of the Organization of Islamic Cooperation (OIC) on the third biennial review of the United Nations Global Counter-Terrorism Strategy. After the first part of my statement, I will address the Assembly in my national capacity.

At the outset, the OIC would like to express its appreciation for the efforts of His Excellency Ambassador Guillermo Rishchynski, Permanent Representative of Canada, in his capacity as facilitator of the United Nations Counter-Terrorism Strategy third biennial review consultations, aimed at reaching a consensus draft resolution on the third review. The OIC reaffirms the principles of the United Nations Charter, particularly the sovereign equality, territorial integrity and political independence of Member States.

The OIC strongly condemns terrorism in all its forms and manifestations, including State terrorism as well as individual and group terrorism, committed by whomever, wherever and for whatever purposes. It also underlines the need for respect for international law, international humanitarian law, the rule of law, human rights and fundamental freedoms in the fight against terrorism. The OIC continues to support the United Nations Global Counter-Terrorism Strategy, which, among other objectives, should also address the root causes of terrorism, including the unlawful use of force, aggression, foreign occupation, festering international disputes, denial of the right of peoples living under foreign occupation to self-determination, political and economic injustices, and political marginalization and alienation. At the same time, the fight against this threat requires a comprehensive set of measures, to which the security component is indispensable but not sufficient on its own. Therefore, when the necessary security measures are implemented, the social, political, cultural and economic aspects of the matter should also be addressed.

The OIC reaffirms that the United Nations Global Counter-Terrorism Strategy, as contained in resolution 60/288, is an ongoing effort and a living document that should be updated and examined biennially. The OIC also reaffirms its support for the balanced implementation of all aspects of the four pillars of the Strategy. It continues to reject unequivocally the association of terrorism with any religion, nationality, civilization or ethnic group. We believe that irresponsible statements that attempt to associate terrorism with any religion or nationality are themselves a clear incitement to terrorism. The OIC would also like to express its concern about the payment of ransoms to terrorist groups, which constitutes one of the sources for financing terrorist activities, as well as to stress the central role of the General Assembly in countering terrorism, since it is the only United Nations body that enjoys universal membership.

The OIC joined the consensus on the draft resolution. However, it is unfortunate that the draft resolution could not take on board some of the OIC group's proposals, such as noting the changing nature and character of terrorism, the need to counter acts committed by self-radicalized individuals around the world, and the links between international organized crime and the financing of terrorism.

The OIC took note of the recommendations for the way forward contained in the report of the Secretary-General (A/66/762) on the activities of the United Nations system in implementing the Strategy, in particular the recommendation of the Secretary-General to appoint a United Nations counter-terrorism coordinator. The OIC is of the view that the transparency and coordination of the activities of the United Nations counter-terrorism-related entities should be enhanced and that any duplication of work is to be avoided. In addition, while the OIC supports the institutional coherence of the United Nations, it also emphasizes the importance of respecting the mandates of various organs of the United Nations, as outlined in the Charter.

The OIC recognizes the importance of the regular briefings on activities undertaken by the

Counter-Terrorism Implementation Task Force (CTITF) during the past two years. We commend the work of the Task Force so far and strongly encourage it to continue to carry out its work with the same diligence in order to keep the members of the General Assembly updated on its activities in implementing the Strategy. Moreover, we would also like to encourage the CTITF to enhance its consultations with Member States during the planning and preparation phase of its activities.

The OIC stresses that the implementation of the Strategy lies first and foremost in the hands of Member States and calls for the enhanced engagement of Member States with the work of the CTITF.

The OIC firmly believes that the involvement of the United Nations specialized agencies, funds and programmes in the implementation of the Strategy as a whole should not affect their mandates and operational activities. The OIC notes with appreciation that the United Nations Counter-Terrorism Centre has initiated its activities and intends to use its resources to strengthen the United Nations counter-terrorism efforts.

The Group recognizes the need to strengthen support to Member States, upon their request, in the domestic implementation of the Strategy through enhanced technical assistance and capacity-building based on their national priorities.

I shall now speak in my national capacity.

(*spoke in Arabic*)

My country, Syria, has recently witnessed painful events as a result of terrorist acts carried out by extremist terrorist groups using unconventional criminal methods. Those acts are based on radical Takfiri religious fatwas issued by instigators residing in countries that are well known to all. The Takfiri religious extremist groups use suicide agents, booby-trapped cars and explosive belts and ordnance to strike at targets of vital use and infrastructure in order to inflict widespread death, destruction and terror among the citizens. The targeting of civilians and law enforcement forces, as well as private and public properties, has unfortunately become the daily routine of the armed terrorist groups, which have now become professional perpetrators of armed robbery, banditry, the burning of hospitals and clinics, plundering, assassination and acts of aggression against peaceful citizens in their homes and places of business in order to terrorize and displace them, in addition to holding civilian and military hostages for financial ransom in order to support their terrorist acts or to achieve political objectives.

Among those operations was the recent action taken by armed groups in Syria, with foreign support, against a number of Lebanese pilgrims returning from Iran via Turkish territory. Some of those organized terrorist acts bear the fingerprints of the Al-Qaida organization and its ideology in the way they kill, dismember and mutilate bodies, murder entire families on a sectarian basis; and carry out coordinated suicide bombings in more than one place in order to terrorize Syrian society. I regret to inform the Assembly that two terrorist attacks took place today close to the Palace of Justice in Damascus. We do not yet know the toll in terms of lives or material cost.

Such terrorist operations could not be carried out without adequate financing and support in the form of money, weapons or persons, or without the media and political coverage of the groups responsible for those operations. Indeed, it is regrettable that some Arab and regional States, among others, provide such resources to armed terrorist groups in order to carry out terrorist acts in my country, Syria. In fact, those countries have pledged openly and in broad daylight, at conferences whose organizers claim that they are friends of the Syrian people, to provide support in terms of weapons, money, training and safe haven to terrorists and to allow them to carry out terrorist acts from their terroritories.

The interception of the ship *Lutfallah II* has demonstrated the involvement of Arab and non-Arab countries seeking to send lethal weapons to terrorist groups in Syria for the purpose of killing and destruction. Reform is the legitimate demand of all Syrians. Fighting corruption is a demand of 99.9 per cent of the Syrian people, but reform and fighting corruption cannot be undertaken via terrorist means. We have drawn the attention of the Secretary-General and the President of the Security Council to the incident of the *Lutfallah II*, in addition to information related to the smuggling of weapons and terrorists across borders from neighbouring countries.

The mass media instigation of terrorism inside Syria has unfortunately become a de facto painful intervention from which all the Syrian people are suffering. An impartial and serious approach is needed. The terrorists have recently been using information and communications technologies provided openly even by some of those countries that have suffered the

scourge of terrorism. Unfortunately, however, those countries call such technology "*non-lethal*". We have also seen television channels directed at Syrian society that broadcast extremist religious ideology that incites terrorism, killing and sectarian and religious sedition, which are supported by some countries and radical groups.

It is a striking paradox that, at the same time, some Syrian satellite television stations have been banned under a resolution adopted by the League of Arab States, on top of the unilateral sanctions imposed by the European Union on the Syrian Radio and Television Organization, as well as those imposed before that by the United States Government on some Syrian information outlets. This fierce campaign against private and public Syrian media has encouraged so-called peaceful terrorist groups to carry out a terrorist attack on the headquarters and buildings of the Syrian Ekhbariya television news station, including the assassination of four innocent Syrian journalists and five administrative staffers, after tying their hands, as well as blowing up the entire building. It is indeed sad that, at a time when we are discussing the United Nations Global Counter-Terrorism Strategy, beginning with the Secretary-General and the Chair of the Counter-Terrorism Commission, no one has expressed condolences to the people of Syria and the victims or condemned the act of terrorism that led to the loss of those Syrian journalists.

The number of victims of terrorist groups in Syria is continually growing. The Syrian Government has been cooperating with the relevant United Nations entities and non-governmental organizations in order to provide humanitarian assistance to those victims and to all who have been forced by the armed groups to leave their homes and places of worship by violence based on vicious sectarian or religious beliefs that are far from the morals and values of the Syrian people, who over the centuries have set an example unique in the region of perfectly harmonious coexistence among the people of all the faiths, races and sects of which it is composed.

Hundreds of thousands of residents of Homs and Hama have been displaced from their homes and expelled. One hundred and ten thousand Christian Syrian citizens have been expelled en masse from their neighbourhoods. Their churches have been occupied and they have been intimidated and threatened with death if they return to their homes. Hundreds of thousands of other, Muslim residents of those two cities have also been displaced and expelled. They have also been told that they will be killed if they return to their homes.

Syria calls on all States to work with it in order to scrupulously implement the provisions of the United Nations Global Counter-Terrorism Strategy. We must follow our words with deeds by taking the steps necessary to prevent and halt the financing of any terrorist acts or the preparation of such acts against Syria from the territories of neighbouring States, and by refusing to provide sanctuary for any who plan, support or commit terrorist acts. Such acts have spilled the precious blood of our people, both civilian and military. The day will come when we will hold to account all who participated in those acts, instigated, financed or facilitated them.

The terrorist acts taking place in my country, aimed at destabilizing the State, society and people, are no less dangerous than any of the terrorist acts that have targeted many States Members of the United Nations, developed and developing alike. There is no sanctioned or unsanctioned terrorism according to religious fatwas; there is only one kind of terrorism and it must be combated, and the terrorism that is targeting Syria is the very same terrorism that has targeted and continues to target other Member States. There is nuclear terrorism, information terrorism and cultural terrorism. There is political and economic terrorism. All of those are terrorism. But the ensuing suffering remains the same.

The President: I now give the floor to the observer of the European Union.

Ms. Marinaki (European Union): On behalf of the European Union and its member States, I am honoured to speak on our contribution to the third review of the implementation of the United Nations Global Counter-Terrorism Strategy.

The acceding country Croatia; the candidate countries Turkey, the former Yugoslav Republic of Macedonia, Montenegro, Iceland and Serbia; the countries of the Stabilization and Association Process and potential candidates Albania and Bosnia and Herzegovina; as well as Ukraine and Georgia, align themselves with this declaration.

The European Union pursues a civilian approach towards addressing counter-terrorism globally, on the basis of criminal justice and the rule of law, while protecting human rights. The European Union

condemns terrorism unreservedly in all its forms and manifestations. What unites us is our determination to step up our collaboration and achieve more effective international efforts to prevent and fight terrorism, as well as our desire to increase mutual understanding and trust. Both those objectives are important.

Broadening the international consensus and enhancing international efforts to combat terrorism remain key objectives for the European Union. We fully support the key role of the United Nations in preventing and combating terrorism, and we advocate compliance with recognized international standards. The European Union fully appreciates the fact that the United Nations Global Counter-Terrorism Strategy has expanded the global counter-terrorism framework to include not only law enforcement and other security measures, but also measures to ensure respect for human rights and to address underlying conditions conducive to the spread of terrorism, such as prolonged unresolved conflicts, rule of law problems, violations of human rights and social, economic and political marginalization. The United Nations Global Counter-Terrorism Strategy contains a complete set of measures that must be implemented in their entirety. As such, it offers an opportunity to recalibrate all our efforts and develop more balanced responses to the threat of terrorism by bringing together security, the rule of law, development objectives and the protection of human rights.

The 2012 review of the implementation of the Strategy is an important step forward. The European Union appreciates the Secretary-General's report on the Strategy (A/66/762), and fully shares the recommendations in part VII of the report. It therefore endorses in particular: first, appointing a United Nations counter-terrorism coordinator; secondly, developing national and regional Strategy implementation plans; thirdly, enhancing capacity-building efforts; fourthly, promoting international cooperation; and fifthly, strengthening international solidarity with victims of terrorism.

The United Nations has a unique international role, and its Strategy is of fundamental importance to the European Union and its member States, in the context both of their own national efforts and their world-wide partnerships. The implementation of the Strategy should be pursued. As highlighted at the Secretary-General's Symposium on International Counter-Terrorism Cooperation on 19 September 2011, greater efforts are required, particularly in the field of the prevention of terrorism.

The European Union believes in the importance of supporting countries that encounter difficulties in confronting terrorism in order to strengthen their counter-terrorism capacities. That is why the European Union and its member States will enhance their counter-terrorism capacity-building measures.

The focus on implementation and international cooperation serves to underline the importance and added value of national and regional counter-terrorism strategies. The European Union and its member States have established their own counter-terrorism strategies, which address external and internal security issues. In our cooperation with other countries and regions, we have started to develop comprehensive counter-terrorism strategies, building on national and regional counter-terrorism approaches, thereby ensuring ownership and participation.

Mr. Alotaibi (Kuwait), Vice-President, took the Chair.

The European Union encourages States and regions to adopt counter-terrorism strategies and we support the United Nations efforts in promoting the establishment of regional counter-terrorism strategies in Central Asia. The Counter-Terrorism Implementation Task Force (CTITF) should continue its coordination efforts to promote the implementation of agreed national and regional counter-terrorism strategies. Comprehensive national and regional counter-terrorism strategies are vital if we are to combine all necessary efforts relating to external and internal security aspects, law enforcement, criminal justice, rule of law, prevention — which includes countering violent extremism — and the protection of human rights, together with the involvement of civil society.

Close cooperation of State institutions with citizens and private companies can give us a broader awareness of the perils endangering our lives and thus improve our countermeasures. Therefore, the role of civil society and public-private partnerships in countering terrorism is an important aspect to be taken into consideration. The increased importance of civil society and public-private partnerships should be reflected in the draft resolution (A/66/L.53).

Measures taken to counter terrorism must be in full compliance with human rights obligations, in

accordance with international law, in particular human rights law, refugee law and international humanitarian law. Human rights should form an integral part of national, regional and international counter-terrorism strategies. Grave violations of human rights can create conditions conducive to the spread of terrorism. We remain convinced that effective counter-terrorism and the promotion and protection of human rights are mutually reinforcing and linked with development.

Often, the places where assistance is most needed are those accused of having the most serious human rights violations. Such concerns are becoming increasingly acute for States as they undertake to build counter-terrorism-related justice sector capacity in third countries because of the considerable risk that those enhanced capacities may be employed in a manner inconsistent with human rights obligations. The core challenge lies in mitigating risk by strengthening capacity to reduce it through raising awareness and enhancing implementation of human rights standards and norms in practice.

Specific programming related to the capacity-building initiatives of the European Union and its member States and partners in third countries in this field prove to be good practices, in terms of both general guidance to inform counter-terrorism and human rights capacity-building. The European Union reiterates its strong support for the work of the Special Rapporteur on the promotion and protection of human rights and fundamental freedoms while countering terrorism.

The European Union continues to stress the importance of respecting the rights of the victims of terrorism. Terrorism is a crime directed at society as a whole, and society as a whole needs to show solidarity with those who suffer from it. Victims are the best witnesses of the futility of the violence with which terrorists seek to impose their will, and the European Union would like to express its solidarity with all who suffer as a result of terrorism. The European Union calls upon all States Members of the United Nations and relevant United Nations entities to promote international solidarity in support of the victims of terrorism.

Externally, the European Union promotes confidence-building through regular political dialogues on counter-terrorism and security, and assists countries in need in their efforts via capacity-building measures. The European Union is increasing its support for such counter-terrorism capacity-building measures. In 2009, we developed our first comprehensive counter-terrorism programme, which includes the implementation of the United Nations standards and, in particular, the implementation of the United Nations Global Counter-Terrorism Strategy in priority regions. In its wider assistance programmes, the European Union also addresses the nexus between development and security.

The European Union also welcomes the establishment of the Global Counter-Terrorism Forum (GCTF), which aims at promoting the implementation of the United Nations Global Counter-Terrorism Strategy and reinforces United Nations efforts in that respect. The GCTF fosters multilateral counter-terrorism cooperation, builds confidence and trust, and promotes counter-terrorism capacity-building. Together with Turkey, the European Union is co-chairing the GCTF Horn of Africa Region Capacity-Building Working Group, and we have already started the identification and coordination of capacity-building measures, in particular to support law enforcement cooperation and capacities to tackle terrorist financing.

The European Union and its member States have directly experienced the benefits of closer coordination in the prevention of and the fight against terrorism. Based on our experience, we would like to thank the United Nations for its efforts to step up the coordination of its counter-terrorism-related policies and actions. The European Union encourages the United Nations to continue enhancing its coordination efforts. Therefore, we fully support the Secretary-General's proposal to consider creating the post of a United Nations counter-terrorism coordinator.

The European Union welcomes the fact that the United Nations Counter-Terrorism Centre is starting its operations and in doing so will make a substantive contribution to promoting the implementation of the United Nations Counter-Terrorism Strategy through the CTITF. We encourage the Centre to find synergies with other relevant actors in order to maximize the impact of its programmes.

Finally, the European Union and its member States have a particular commitment through the Lisbon Treaty to supporting the United Nations and an international system based on the rule of law. We will continue to strongly support international counter-terrorism cooperation and the promotion of United Nations standards on counter-terrorism, including the protection of human rights and the promotion of the rule of law.

Mr. Arias (Spain) (*spoke in Spanish*): Allow me to echo other speakers in expressing my gratitude for the convening of this meeting on the third biennial review of the implementation of the United Nations Global Counter-Terrorism Strategy and its 2006 Plan of Action.

Spain aligns itself fully with the statement made by the observer of the European Union.

I would also like to express Spain's appreciation for the work carried out by the Permanent Representative of Canada, Ambassador Rishchynski, and his colleagues, who facilitated the preparation of the draft resolution (A/66/L.53) submitted for consideration today by the General Assembly.

Six years ago, the Assembly took an historic step in adopting by consensus the United Nations Global Counter-Terrorism Strategy, in whose elaboration Spain played a leading role. It is now the responsibility of us all to continue to promote its effective implementation.

Spain deems it imperative to take further measures to address conditions conducive to the spread of terrorism, as highlighted in part I of the Strategy's plan of action. In that regard, one of the priority actions undertaken by Spain in the fight against terrorism is the promotion of international solidarity in support of the victims of terrorism.

Spain believes that victims must play a central role in any strategy to combat terrorism. We have therefore developed a system for the provision of care, support, assistance and reparations to the victims which, I would go so far as to say, is one of the most comprehensive such systems in the world. I would also like to take this opportunity humbly to make available our experience in this field to all States wishing to implement similar measures in support of victims of terrorism.

Spain welcomed and supported the convening of the international Symposium on Supporting Victims of Terrorism by the Secretariat Task Force, convened by the Secretary-General and held here at Headquarters in 2008. We would like to see a similar meeting held in the very near future, and, in that regard, we urge the Secretary-General and the Task Force to take the steps necessary to make such a meeting possible.

Spain welcomes the progress made in the area of assisting victims of terrorism, as reflected in the draft resolution to be adopted today, which stresses the need to promote international solidarity and to protect the rights of victims of terrorism. Here we wish to emphasize our support for the request, made by the Special Rapporteur on the promotion and protection of human rights and fundamental freedoms while countering terrorism, that a specific international instrument on such rights and obligations be created within the framework of the United Nations.

In terms of measures taken to prevent and combat terrorism, I would like to emphasize the fact that Spain has ratified the 18 United Nations Conventions and Protocols that constitute the current international legal framework to combat terrorism. Spain will continue to work towards the consolidation and development of that framework, which should lead to the early conclusion of a United Nations comprehensive convention on terrorism.

In that context, and in particular regarding security issues, I would also like to stress the importance of developing relations between the private and public sectors. Security issues require the establishment of public-private partnerships that allow for pragmatic responses to terrorism, in areas such as research, databases and information exchange, border management and airports, civil aviation, the protection of critical infrastructures, cyberterrorism, mass events and the protection of tourism, inter alia.

The international community should also redouble its efforts to improve prevention practices in all areas of interest, with particular emphasis on the academic and educational sector. It is important to work with young people, as they are especially vulnerable, and to focus on social issues that could give rise to intolerance, extremism and fundamentalism. International cooperation at the regional and subregional levels is vital in that respect.

As regards measures to build the capacity of States to prevent and combat terrorism and to strengthen the role of the United Nations in this regard, Spain has consistently made contributions to the Counter-Terrorism Implementation Task Force in the implementation of the United Nations Global Counter-Terrorism Strategy.

Spain is also providing support to the technical assistance work being carried out by the Security Council Counter-Terrorism Committee Executive Directorate and the United Nations Office on Drugs and Crime, as well as other agencies and regional and sectoral institutions.

I would like here, for various reasons, to highlight the importance of developing national, regional and subregional strategies to fight terrorism. They are key, first, because of the complex situation that prevails in some regions of the world, such as the Sahel, which requires that such strategies be strengthened; secondly, because this is one of the major priorities of the new United Nations Counter-Terrorism Centre; and thirdly, because of the efforts made to date by the Task Force to coordinate the strategies of countries to implement the Integrated Assistance for Countering Terrorism Initiative, which is already bearing fruit.

Finally, in line with the provisions of the Global Strategy on measures necessary to ensure respect for human rights and the rule of law as the fundamental basis of the fight against terrorism, Spain has taken an approach that gives pride of place to international law, respect for human rights and rule-of-law instruments. Spain strongly believes that respect for human rights and the rule of law are the the instruments proper to the rule of law.

Spain firmly believes that respect for human rights and the rule of law form the legal foundation and limit of all actions taken by a State and the international community in the fight against terrorism. Consequently, the sharing of best practices among States should be facilitated and cooperation among countries encouraged in order to enhance the training of police officers, judges and prosecutors.

By way of conclusion, I would like to touch on the Secretary-General's proposal for the establishment of the post of a single United Nations coordinator in the fight against terrorism. Spain firmly supports that proposal and hopes that in the near future the necessary restructuring will be carried out within the United Nations system so as to allow for its creation.

Spain is firmly committed to active multilateralism in the fight against terrorism and believes that the implementation of the United Nations Global Counter-Terrorism Strategy is a valuable tool in the fight against the global threat of terrorism. To achieve the objective of eradicating terrorism, there must be a firm commitment and cooperation on the part of all, and the Global Strategy must be fully implemented, as these are key elements in that respect.

Mr. Churkin (Russian Federation) (*spoke in Russian*): The Russian Federation is a strong proponent of intensifying effective international counter-terrorism cooperation and strengthening the central coordinating role of the United Nations in that process. Thanks to the efforts of the United Nations, we have a successfully functioning, broad-based infrastructure for counter-terrorism cooperation that includes many regional organizations and associations. An international legal basis for countering terrorism has been created. Work is under way on formulating and promoting standards in that domain. What is important is the consistent implementation of all resolutions and decisions on counter-terrorism adopted by our Organization.

The adoption by consensus of the Global Counter-Terrorism Strategy (resolution 60/288) by the General Assembly in 2006 was a key element of the global counter-terrorism system. For the first time in international law practice, it enshrined a comprehensive and holistic approach towards counter-terrorism, flexibly combining traditional law enforcement measures with prevention and addressing the various social root causes of terrorism by enhancing the legal structure and upholding human rights.

Russia is in favour of intensifying efforts to implement the Strategy, including in such priority areas as preventing the radicalization of society, counteracting violent extremism, and preventing the media and Internet for terrorist purposes. An important role in its implementation lies with national counter-terrorism strategies and the coordination mechanisms of interdepartmental interaction in the sphere of counter-terrorism. We note the contribution towards the implementation of the Strategy carried out by the Security Council, its Counter-Terrorism Committee Executive Directorate, and its Committees established pursuant to resolutions 1267 (1999), 1540 (2004) and 1988 (2011), together with their Expert Groups.

We support the work of the Counter-Terrorism Implementation Task Force. We are keen to further develop substantive dialogue within the existing working groups under its aegis. We hope that the recent launching of the United Nations Counter-Terrorism Centre will galvanize the Task Force's work. We are in favour of further strengthening the interaction among the Task Force, the General Assembly and the Security Council.

In that regard, we support the Secretary-General's proposal to create the post of a United Nations

counter-terrorism coordinator. We believe that promoting the Strategy should be the central element of its mandate. In that regard, we believe that it is important that any reform in the counter-terrorism sector of the United Nations linked to the creation of a new post should not affect the mandates of the counter-terrorism bodies or hamper the effectiveness of their work. We would also like to see the effective involvement of the Global Counter-Terrorism Forum in the work of the United Nations specialized agencies. In that regard, we welcome the planned establishment through the Forum of an international centre to counter violent extremism.

We are determined to enhance Russia's contribution to implementing the Strategy. Ahead of today's review, we have presented detailed information on counter-terrorism efforts undertaken by the Russian counter-terrorism authorities and all of Russian society in the context of the Strategy. Since the last review of the Strategy two years ago, Russia has pursued its active participation in projects carried out through the Task Force, above all in such priority areas as public/private counter-terrorist partnerships and countering the terrorist use of the Internet.

Setting great store by the role of regional organizations in implementing the Strategy, we have actively participated in the work in that field carried out by the Commonwealth of Independent States, the Collective Security Treaty Organization and the Shanghai Cooperation Organization. The adoption of a joint declaration on cooperation between the United Nations and the Collective Security Treaty Organization contributed to general efforts to implement the Strategy.

A notable role in mobilizing global counter-terrorism efforts is also played by the annual international meeting of the heads of the relevant special services held in Russia, the outcomes of which are regularly conveyed to the Counter-Terrorism Committee Executive Directorate.

My country continues to implement the concept of counteracting terrorism in Russia, approved by the Russian President. It defines the main principles of State policy in that sphere, including the effective implementation of the Strategy. A special focus in that regard is placed on developing counter-terrorism cooperation with the media, scientific and cultural circles, academia and religious organizations. Such cooperation should help tackle the important tasks of preventing terrorism, teaching and educating youth to reject terrorism and extremism, and establishing principles of tolerance and cultural and religious equality in society. We have a successfully functioning national counter-terrorism committee that brings together the heads of the Russian security bodies, law enforcement structures, the Foreign Ministry, other departments and the speakers of both chambers of the Russian Parliament. Russia is ready to continue to actively share its counter-terrorism experience, which has already proven its worth, with foreign partners.

During the current review, it is especially important to stress the importance of the comprehensive implementation by States of the Strategy, highlight its significance and prevent any watering down of its primary goals. We believe that this is fully in accordance with the draft resolution on the review of the Strategy to be adopted at the end of this debate. We believe that it would be a good basis for our further joint work on the implementation of the Strategy. In that regard, we thank the facilitator of the preparatory process for the draft resolution, the Permanent Representative of Canada, Mr. Rishchynski, for all his successful work.

Mr. Diseko (South Africa): We extend our appreciation to the President for convening this high-level event, which coincides with the third biennial review of the United Nations Global Counter-Terrorism Strategy. This event, coming soon after the high-level Symposium on International Counter-Terrorism Cooperation, hosted by the Secretary-General in the General Assembly last year, as well as the 10-year commemoration of the adoption of resolution 1373 (2001) — which, inter alia, established the Counter-Terrorism Committee — confirms the centrality of the United Nations in fighting the scourge of terrorism. Those events have further contributed to enhancing the visibility of the United Nations in the international campaign against terrorism.

My delegation supports the approach that continues to place the United Nations at the centre of multilateral efforts to counter terrorism, and we are firm in our belief that no country can address that challenge on its own and that terrorism will not and cannot be defeated by military means.

The Global Counter-Terrorism Strategy is a product of the collective efforts of the Members of the United Nations. The Strategy is premised not only on addressing the conditions conducive to the spread of terrorism, but also on respect for the rule of law and

human rights. South Africa therefore supports the adoption of the consensus draft resolution (A/66/L.53) following the third biennial review process because we view this decision as one that ensures a holistic and multifaceted approach to countering the scourge of terrorism.

Taking stock of what we have collectively achieved in the lead-up to this third review of the Global Counter-Terrorism Strategy, we note the seminal institutional developments in the following areas: first, the establishment and growth of the Counter-Terrorism Implementation Task Force, which now comprises 31 entities; secondly, the contribution of the Integrated Assistance for Countering Terrorism initiative towards facilitating an integrated and coordinated approach among the 31 entities through effective information-sharing, including with Member States; thirdly, the creation and recent operationalization of the United Nations Counter-Terrorism Centre; fourthly, the adoption of the first regional action plan by the Central Asian region to assist in implementing the Strategy; and, fifthly, the hosting of at least three regional workshops with key partners in five regions in order to widely disseminate better understanding and knowledge of the Strategy.

Notwithstanding those substantial gains at the international level within a relatively short space of time, much more needs to be done in order to fully implement the Strategy. The focus on coordination and cooperation will shift to the regional and national levels, cognizant that the responsibility to implement the Strategy lies primarily with Member States. At the same time, the United Nations must remain seized of ongoing efforts to refine its institutional framework so that it can provide effective support to Member States in implementing the Strategy.

South Africa has always maintained that the four pillars of the Strategy must be implemented in a balanced and integrated manner. As affirmed at the 2011 Symposium, the Strategy remains the most credible and relevant international mechanism, enjoying the wide political support of all Member States, for countering the scourge of terrorism worldwide.

In addition to the strides that have been made in preventing and combating terrorism, as well as measures to build States' capacity in that regard, a balanced approach would mean renewed effort and commitment on the part of the international community to addressing the conditions conducive to the spread of terrorism. There is therefore an urgent need for the international community and the United Nations to step up efforts to resolve long-outstanding conflicts in accordance with international law and international human rights law, and to adopt strategies aimed at limiting political exclusion and rejecting socio-economic marginalization.

A balanced approach to the implementation of the Strategy would require the international community to remain steadfast in its commitment to ensuring the timely and full realization of the development goals and objectives of eradicating poverty and promoting sustained economic growth, as well as sustainable development and global prosperity for all. In the prevailing international economic and financial climate, the international community must reinforce development and social inclusion agendas, especially regarding youth unemployment, as such efforts can help to reduce marginalization and counter the potential appeal of extremism and recruitment by terrorists.

We concur with the view expressed in the Secretary-General's report (A/66/762) that human rights protection should be seen not as an obstacle to effective counter-terrorism but as an essential element of any sustainable counter-terrorism strategy. The strengthening of the international legal architecture, the rule of law and systems of criminal justice represents the fundamental basis of our common approach to counter-terrorism. In that context, promoting and protecting human rights for all is essential to all components of the Strategy, and that approach is complementary and reinforcing.

The Office of the High Commissioner for Human Rights should continue to play a leading role in examining the question of protecting human rights while countering terrorism. The Office has the relevant authority and mandate to make general recommendations on the human rights obligations of States and to provide them with the requisite assistance. This area requires renewed attention, given the concern expressed by the High Commissioner about the erosion of respect for due process guarantees. These are related to the Security Council's individual sanctions regimes and other practices that impede the right to a fair trial in the context of counter-terrorism, such as the use of intelligence in criminal justice proceedings. In that regard, our delegation welcomes the enhancement of the Ombudsperson's mandate and the institutionalization

of the sunset clause as steps towards improved due process standards, and is fully supportive of the work of the Ombudsperson's Office.

The work of the Special Rapporteur on promoting and protecting human rights and fundamental freedoms while countering terrorism must also be fully supported. The Special Rapporteur's Office complements all counter-terrorism efforts and contributes to an integrated and balanced approach through its interaction with all the relevant stakeholders, including Member States, the Counter-Terrorism Implementation Task Force, the Counter-Terrorism Committee Executive Directorate and the Security Council Committee established pursuant to resolutions 1267 (1999) and 1989 (2011) concerning Al-Qaida and associated individuals and entities.

The biennial review process must continue to provide a forum for Member States for the frank and honest assessment of progress made in implementing the Strategy. South Africa maintains that while this review must entail a balanced approach, Member States must also confront the core issues related to the spread of terrorism. In the action plan that we collectively adopted in 2006, we undertook to make every effort to conclude a comprehensive convention on international terrorism that would also address the gaps in the international legal arena that might exist, while also encouraging Member States to become parties to existing international conventions and protocols. We believe that adoption of a comprehensive convention should be delayed no longer. Failure to adopt it is not only a serious indictment of our commitment to countering terrorism, but also undermines all our current reviews of the Strategy.

Mr. Núñez Mosquera (Cuba) (*spoke in Spanish*): Cuba firmly supports the collective efforts of the United Nations to combat terrorism. The United Nations Global Counter-Terrorism Strategy (resolution 60/288) is a milestone in the international battle against this scourge, and assigns the General Assembly the central role in those efforts. Cuba reiterates its unwavering resolve to combat terrorism, as well its thorough rejection and condemnation of every terrorist act, method and practice in all their forms and manifestations by whomever, against whomever and wherever they are committed, regardless of their motivation, and including those in which States are directly or indirectly involved. Moreover, Cuban territory has never been and will never be used to organize, finance or execute terrorist acts against any country.

My people have lost 3,478 of its sons to terrorist attacks. Another 2,099 have been crippled for life by terrorist acts committed against my country for half a century. Many of the individuals responsible for those acts walk the streets of these United States freely and peacefully. Despite that, and with no justification, the Government of this country continues to include Cuba on a spurious list of States that sponsor international terrorism. My country firmly rejects its inclusion on that list; it is unilateral, politically motivated and determined by a country bereft of any moral authority to judge others regarding terrorism.

Our country was one of the first three States to ratify the 12 original international instruments dealing with international terrorism. We are party to 13 existing international conventions treating the subject, in accordance with which we have implemented legal and institutional measures to address this scourge effectively. The Republic of Cuba has a general law against terrorist acts and has adopted non-legislative internal measures to prevent and combat terrorism. As a State Member of the United Nations, our country complies strictly with its obligations under Security Council resolutions 1373 (2001), 1267 (1999) and 1540 (2004), and thus regularly supplies the United Nations with updated information on the steps we are taking to combat terrorism in all its forms and manifestations.

The international community should not accept that, under the pretext of a supposed struggle against terrorism, certain States may commit acts of aggression and interfere in the internal affairs of others, perpetrate or enable flagrant violations of human rights and international humanitarian law such as torture, abduction, illegal detention, disappearances or extrajudicial executions. To accept that would be in total contradiction with the United Nations Charter and the principles and standards of international law. Any violation of those legal and ethical principles weakens the legitimacy of our combat against international terrorism and sullies the values of the humanist culture that we defend in the face of hatred, vengeance and terror.

This year, we have made considerable progress in this matter through the periodic review of the Global Strategy. We thank the delegation of Canada for coordinating this complex issue, and those delegations

that have shown the political will to move ahead in the struggle against the scourge of terrorism. The draft resolution (A/66/L.53) for the first time contains a direct reference to the need to work against the causes fostering the spread of terrorism, and a clear call to implement the Strategy in a balanced manner. Alas, due to the opposition of certain delegations, it was not possible to introduce a specific mention of the failure to implement pillars I and IV of the Strategy on measures to address conditions that foster the spread of terrorism and to ensure respect for the human rights of all and the rule of law as the fundamental basis of the fight against terrorism.

The Secretary-General's proposal concerning the creation of the post of a coordinator has been discussed. It is clear that doubts have arisen around that proposal, and that Member States need more information if the matter is to be discussed appropriately. A decision of that magnitude can be adopted only by consensus in the General Assembly.

Other matters of great importance have been incorporated into this year's draft resolution; more still will have to be included in the future. For instance, a reference to support for the rights of victims of terrorism in all its forms and manifestations has been included. On that point, we stress that States must comply with their international obligations without double standards so that the victims of terrorism, including State terrorism, may enjoy their rights fully.

States must comply with their obligations to try and extradite all terrorists without exception, such as the well-known confessed terrorist Luis Posada Carriles, who walks freely in the streets of the host country without having been brought to justice for his criminal acts. By contrast, five young Cubans, whose only crime was to combat terrorism in order to save the lives of Cuban and American citizens, received lengthy prison sentences in the United States. In the coming days, it will be 14 years since those young people were unjustly imprisoned in that country after a rigged trial of no substance.

The draft resolution recognizes the efforts that have been made by States and international organizations, taking into account their different national and regional circumstances. However, what is lacking is a clear condemnation of all unilateral acts undertaken by certain States that, counter to international law, have illegitimately arrogated the right to classify conduct and draw up politically motivated lists. We must continue to work to clearly condemn such harmful practices and any attempt to undermine the core authority of the General Assembly in this sphere.

The draft resolution clearly emphasizes the need for more dialogue and greater understanding among cultures and civilizations. It expresses concern at the rise in abductions and the use of modern communications technologies to promote terrorist activities. It is relevant to mention here the harmful practice of certain States in funding, supporting and promoting, by means of the Internet, radio or television, messages of intolerance and hatred against other peoples, cultures or political systems, in violation of the most elementary principles of the Charter of the United Nations and international law.

Cuba believes that impunity and double standards are unacceptable in the fight against terrorism. Terrorism must be rejected in all circumstances. There must be closer cooperation among States to combat the scourge, on the basis of respect for sovereignty and non-interference in the internal affairs of States. Selectivity and the petty desires of the eternally powerful to seize land to satisfy their insatiable appetite for strategic resources must cease.

Finally, we reiterate the firm and unshakeable resolve of the Government and people of Cuba to cooperate in multilateral endeavours to put an end to all terrorist acts, methods and practices in all their forms and manifestations. My country commits itself to combating terrorism, and expresses its willingness to cooperate with all States in that fight.

Mr. Shinotsuka (Japan): On behalf of the Government of Japan, I would like to express my appreciation for the President's leadership in preparing the third review of the United Nations Global Counter-Terrorism Strategy. I also extend our sincere gratitude to Mr. Rishchynski, Ambassador and Permanent Representative of Canada, for his great contribution and efforts to facilitate the consultations on the draft resolution on the review of the implementation of the Strategy (A/66/L.53).

Japan welcomes the positive and substantive discussion during the Secretary-General's Symposium on International Counter-Terrorism Cooperation held last September, as well as the comprehensive report of the Secretary-General on the activities undertaken by the United Nations system in implementing the Strategy (A/66/762).

The concerted efforts of the Member States and the international community to fight terrorism have yielded remarkable results and mark an important step forward in counter-terrorism. However, acts of terrorism continue to be committed, and the actors and methods of terrorism are becoming more diverse. For example, we have observed the emergence of regional terrorist organizations, the use of the Internet and other new information and communications technology to incite terrorism, and the increase of so-called home-grown terrorists. Terrorism remains a grave threat and challenge to the international community, and our continuing and comprehensive efforts are necessary to tackle it.

Since the adoption of the United Nations Global Counter-Terrorism Strategy in 2006 (resolution 60/288), the efforts of Member States towards its implementation have steadily progressed. The Strategy continues to be an important, holistic and comprehensive instrument for counter-terrorism. We should therefore take the opportunity of this biennial review to examine the progress made by all Member States to implement the Strategy in an effort to prevent and fight terrorism, and to reaffirm our commitment to enhancing our counter-terrorism cooperation under the Strategy.

It is also necessary that coordination and collaboration between the United Nations and regional and multilateral counter-terrorism frameworks, such as the Global Counterterrorism Forum, the Association of Southeast Asian Nations (ASEAN), the Asia-Pacific Economic Cooperation forum and the Asia-Europe Meeting, be continued.

With regard to the Secretary-General's recommendation to appoint a United Nations Counter-Terrorism coordinator, Japan recognizes the necessity of establishing this position in order to promote better coordination among the related United Nations entities. Japan also welcomes the establishment of the United Nations Counter-Terrorism Centre and appreciates the initiative of the Kingdom of Saudi Arabia. Since all international counter-terrorism efforts should be concerted and integrated to maximize their effectiveness, Japan hopes that these recent initiatives will promote further close coordination and cooperation while avoiding duplication of tasks.

Coherence within the United Nations system is underlined in the Strategy. In this regard, Japan highly appreciates the work of the Counter-Terrorism Implementation Task Force on integrated assistance for countering terrorism, resulting in effective coordination among its entities to address the capacity-building needs of Member States, which is one of the four pillars of the Strategy.

Japan has been implementing the Strategy and extending cooperation to many countries, focusing on poverty reduction, sustainable growth, addressing global issues and peacebuilding. We believe that these efforts contribute to addressing the conditions that are conducive to the spread of terrorism, while recognizing that none of these conditions ever justifies acts of terrorism.

In this regard, Japan has been continuously providing assistance to Afghanistan in order to ensure its sustainable development and to eliminate the conditions that allow for the spread of terrorism in the country. Japan has been making contributions to strengthen the legal regime and the capabilities of law enforcement entities in fighting terrorism in Afghanistan and its neighbouring countries through the United Nations Office on Drugs and Crime. As our Foreign Minister, Mr. Gemba, stated clearly at the meeting on Afghanistan held on the occasion of the NATO summit held in May in Chicago, Japan intends to continue providing appropriate assistance to the Afghan National Security Forces beyond 2014. Furthermore, to address Afghanistan's development needs, Japan will host the Tokyo conference on Afghanistan on 8 July, together with the Government of Afghanistan, inviting approximately 70 countries and international organizations in order to pave the way towards achieving the sustainable development of Afghanistan, starting now and into the transformation decade beyond 2014.

Japan emphasizes regional cooperation on counter-terrorism. Having particularly close ties with South-East Asian countries, Japan attributes great importance to cooperation in that region. Japan holds the ASEAN-Japan Counter-Terrorism Dialogue every year and has been extending assistance to ASEAN countries for counter-terrorism capacity-building programmes.

We also underline the importance of ensuring the protection of human rights and the rule of law while fighting terrorism. Japan intends to cooperate with the international community's efforts in this area, including through support for victims of terrorism.

I take this opportunity to reaffirm Japan's resolve to implement the Strategy and its strong commitment

to continuing its efforts and cooperation at the national, regional and international levels to eradicate terrorism. Hoping to see more effective coordination within the United Nations and its relevant entities for the implementation of the Strategy, Japan is ready to make an active contribution towards that endeavour.

Mr. Khalil (Egypt) (*spoke in Arabic*): At the outset, I would like to thank the Permanent Representative of Canada for his efforts in facilitating the consultations on the draft resolution on the United Nations Global Counter-Terrorism Strategy (A/66/L.53).

Egypt also aligns itself with the statement delivered by the representative of the Syrian Arab Republic on behalf of the Organization of Islamic Cooperation.

(*spoke in English*)

The third review comes six years after the General Assembly's adoption of resolution 60/288 by consensus, which established the Strategy as the governing framework of the United Nations efforts in combating terrorism. Despite the Secretariat's continued efforts to implement the Strategy, there is a need for a more balanced implementation of the four pillars, especially pillars I and IV, which address the conditions conducive to the spread of terrorism and respect for human rights, respectively. We welcome the fact that the third review's draft resolution outlines the importance of a balanced implementation of all pillars of the Strategy. We hope that all relevant organs and bodies of the United Nations working in the field of counter-terrorism shall take this carefully into account.

The principal responsibility for implementing the Strategy lies with Member States. The Secretariat should assist Member States in developing national strategies to counter terrorism by identifying their needs and building their capacities. In this context, we call for an enhanced engagement of Member States with the work of the Counter-Terrorism Implementation Task Force, including by participating in the elaboration of programmes and activities carried out by the Task Force and its working groups. We look forward to receiving the periodic work plan of the activities of the Task Force in accordance with the draft resolution and to thoroughly discussing it.

The establishment of the United Nations Centre for Counter-Terrorism within the Task Force in November 2011 was an important development. It will definitely contribute to the implementation of the Strategy and strengthen the role of the General Assembly in this regard. We call on the secretariat of the Centre to finalize its logistical arrangements and to start its operational activities in accordance with the strategic priorities set out by the Centre's Advisory Board at its second meeting, held in Jeddah, Saudi Arabia, on 3 June. We also look forward to an enhanced role of the General Assembly in the fight against terrorism.

Egypt supports efforts aimed at enhancing overall coordination and avoiding duplication in the work of organs and bodies of the United Nations in the fight against terrorism. In this regard, we look forward to receiving greater detail concerning the Secretary-General's proposal on the creation of the post of United Nations Counter-Terrorism coordinator, as contained in his recent report (A/66/762). That will allow us to have an informed discussion on this issue in future and take an appropriate decision in that respect. We emphasize that such a position, if created, should not affect the existing mandates of United Nations organs, especially the General Assembly's central role in countering terrorism.

Egypt has repeatedly reiterated that the adoption of a security perspective alone to address terrorism will not achieve the desired results. The international community should work actively to address the root causes of terrorism and adopt objective measures aimed at tackling the political, economic and social conditions that lead to its spread. Most important among such measures should be putting an end to foreign occupation, together with the recognition of the legitimate right of peoples to self-determination — in addition, of course, to achieving justice and the rule of law, and working for the economic and social development of all peoples and countries.

Continuing to focus only on security measures in the fight against terrorism without addressing its root causes, promoting dialogue and understanding, and countering incitement to terrorism would leave room for terrorists to spread their ideas and attract more individuals to help them achieve their devastating aims.

Finally, I would like to reiterate Egypt's firm commitment to implementing the Strategy, as well as its support for international efforts to counter terrorism. We stand ready to contribute actively to such efforts by providing expertise and sharing the lessons that we have learned as a result of our efforts over the past decades at the national and regional levels to resolutely combat terrorism.

Mr. Vandoren (Belgium) (*spoke in French*): Belgium aligns itself with the statement made on behalf of the European Union (EU) and its member States.

Belgium is determined to contribute, together with its EU partners, to galvanizing the implementation on the ground of the United Nations Global Counter-Terrorism Strategy, including all of its components and with the involvement of all stakeholders, including the private sector, civil society and the media.

Belgium thanks the Secretary-General for his latest report (A/66/762) and supports the recommendations made therein. We also thank the Canadian delegation for having facilitated the negotiations on the draft resolution (A/66/L.53) that is before the Assembly.

Belgium attaches particular importance to the strengthening of capacities to prevent and combat terrorism. The United Nations Counter-Terrorism Centre must make a significant contribution to that goal. Belgium is prepared to share its good practices and lessons learned, in particular in the framework of the Centre.

I should like to outline, in three points, the specific actions taken by Belgium in the implementation of the United Nations Global Counter-Terrorism Strategy and of the EU strategy, with particular focus on the efforts aimed at enhancing the quality of information and of the structures in place for the exchange thereof.

The Coordinating Body for Threat Analysis (OCAM), of which I am the head, was born of Belgium's resolve to enhance synergies among all of the national entities involved in the combat against terrorism, extremism and radicalism. The goal was the development of a common, integrated approach to analysing the terrorist and extremist threat for the benefit of the national authorities and foreign partners.

In the context of Belgium's counter-terrorist architecture, OCAM was accorded a central position that was legally strengthened, in an unprecedented manner, through the imposition of criminal penalties on those partner services that had been deliberately omitted to provide OCAM with the relevant information.

As an international capital that is host to European and international institutions as well as many multinational companies' coordination centres, the city of Brussels requires heightened vigilance on the part of all our services in assessing the terrorist threat resulting from that status.

By dint of long experience in that respect, the Belgian authorities have always been mindful of optimizing the information and resources available in order to provide adequate protection for the institutions that Belgium hosts. That is one of the numerous tasks carried out daily by OCAM, which is working assiduously in that respect, in cooperation with its partner services, including the Government's crisis centre.

It was when Dutch filmmaker Theo Van Gogh was assassinated that Belgium became aware of the extent of the threat posed by extremism and radicalization. In that respect, the Belgian Government's radicalism action plan, known as plan "R", is one of the key elements of the national capacity to counter those phenomena. The plan is aimed at detecting early signs of radicalization and responding appropriately, while working to prevent a radical polarization among the various sectors of society.

The recent events in Toulouse and in Brussels were a reminder of the fact that a great deal remains to be done in this area. My country is currently looking at options aimed at complementing existing measures.

Finally, Belgium's architecture for combating terrorism reflects the implementation of a legal and institutional framework that is based on its international commitments. Its goal is both to prevent acts of terrorism and to bring suspects to justice.

A recent law now governs the data-collection methods used by the intelligence and security services, and the use thereof. The more intrusive the method used, the higher the level of monitoring by independent authorities. The system promotes information exchange, through a jurisdictional filter, between the intelligence community and the judicial community. The admissibility of evidence, as determined by a judge, is therefore strengthened further by the system, which represents an important step forward in protecting fundamental human rights.

Although many legislative initiatives have been the subject of debate in our society regarding their impact on fundamental freedoms and liberties, Belgium has no special system of measures for individuals suspected or found guilty of acts of terrorism.

There is no doubt that violations of fundamental rights and freedoms create an environment that is a breeding ground for terrorist activities; the rigorous

protection of those rights therefore remains the key element of Belgium's strategy in countering terrorism.

Mr. Manjeev Singh Puri (India): I join others in congratulating the Permanent Representative of Canada on his outstanding efforts in facilitating consultations and achieving a consensus draft resolution (A/66/L.53) on the third review of the United Nations Global Counter-Terrorism Strategy, to be adopted later today at the conclusion of this debate. We also thank the Secretary-General for his report contained in document A/66/762 on the activities and efforts of the United Nations system in implementing the Strategy.

Terrorism is a global scourge. It continues to be a pervasive and insidious threat not only to international peace and security, but also to the core values of the United Nations. It is our firm conviction that no belief, rationalization, political cause or argument can be used to justify acts of terrorism. We condemn terrorism in all its forms and manifestations, irrespective of its motivations, as criminal and unjustifiable and therefore reiterate that no cause, no matter how seemingly just, can excuse it.

The adoption of the United Nations Global Counter-Terrorism Strategy in 2006 (resolution 60/288) was a landmark in the fight against terrorism. The Strategy is a unique and universally agreed strategic framework to counter terrorism and is intended to play a pivotal role in guiding counter-terrorism efforts undertaken at the global, regional, subregional and national levels. We support the implementation of the Strategy in a comprehensive and integrated manner in all its four pillars.

The institutionalization of the Counter-Terrorism Implementation Task Force (CTITF) in 2009 and the establishment in 2011 of the United Nations Counter-Terrorism Centre within the CTITF are important steps towards strengthening United Nations efforts to counter terrorism by providing an umbrella under which different United Nations entities can effectively support the implementation of the Strategy in a coordinated and coherent manner at the global, regional and subregional levels. We are confident that those steps will be helpful in streamlining the overall work of the United Nations system in countering terrorism. As the principal responsibility for the implementation of the Strategy rests with Member States, we hope that those steps will also provide a useful platform for practical engagement by Member States with the CTITF and the Centre, guided by their individual needs.

With a view to further enhancing transparency and synergies in the United Nations counter-terrorism architecture, we support the Secretary-General's proposal concerning the appointment of a Counter-Terrorism coordinator and look forward to further consideration of the idea in a timely manner.

My own country, India, has faced the scourge of terrorism for over two-and-a-half decades. Indeed, our entire region, South Asia, has been wracked by the activities of the biggest terrorist actors in the world, be they Al-Qaida, elements of the Taliban or Lashkar-e-Toiba, Jamaat-ud-Dawa and others. Speaking at the general debate of the sixty-sixth session of the General Assembly (see A/66/PV.22), our Prime Minister, Mr. Manmohan Singh, said that the fight against terrorism must be unrelenting and fought across all fronts, with no selective approaches in dealing with terrorist groups or the infrastructure of terrorism. Effectively combating this global scourge requires the political will of Member States and greater international and regional cooperation. It is imperative that terrorists and their supporters know that the international community is absolutely firm in its resolve to counter terrorism.

I should like to recall that, on the tenth anniversary of the establishment of the Security Council Committee established pursuant to resolution 1373 (2001) concerning counter-terrorism, a special meeting of the Committee was held on 28 September 2011 in New York. The outcome document adopted by the Committee approved a zero-tolerance approach towards terrorism that is now part of the United Nations counter-terrorism lexicon. While combating terrorism, we need to adopt a holistic approach that ensures zero-tolerance towards terrorism. It goes without saying, and in fact it is absolutely essential, that measures taken by States to combat terrorism comply with all their obligations under international law, in particular international human rights, refugee and humanitarian law.

We need to impart greater momentum to efforts made to bolster the ability of Member States to confront the global menace through greater international and regional cooperation and capacity-building efforts. India strongly supports all efforts, especially within the purview of the United Nations, that strengthen international and regional cooperation in the fight

against terrorism, including efforts aimed at supporting the implementation of the Strategy. I am happy to note that that has been the focus of the third review of the Strategy.

We must also continue to strengthen the normative framework at the United Nations. The time has come for the adoption of the comprehensive convention on international terrorism that has been pending for a long time. The comprehensive implementation of the Global Counter-Terrorism Strategy will be enhanced with the conclusion of the convention. The convention would also plug loopholes in the international legal framework that the United Nations has developed to counter terrorism. As committed in the Strategy, Member States should make every effort to reach an agreement on the text and adopt the convention in order to unite behind the global counter-terrorism efforts.

In conclusion, I wish to reassure the General Assembly that India will continue to effectively contribute to United Nations efforts in countering terrorism and in supporting the implementation of the Strategy at the international, regional, subregional and national levels.

Mr. Loulichki (Morocco) (*spoke in Arabic*): In expressing my support for the statement made on behalf of the Organization of Islamic Cooperation, I would like to thank the President of the General Assembly for having organized today's meeting on the third review of the United Nations Global Counter-Terrorism Strategy. I would also like to express my appreciation for the work done by Mr. Rishchynski, Permanent Representative of Canada, and his team to enable the adoption by consensus of the draft resolution (A/66/L.53) at the end of the third review.

The draft resolution has strengthened the positions we had arrived at in our two previous reviews concerning the important role of the General Assembly in renewing and implementing the Strategy, interactions among Member States and the Working Group in the implementation of the Strategy, and ongoing capacity-building to ensure the effective and balanced expression of the four pillars of the Strategy.

For the first time, Member States have been able to request programmes for the victims of terrorism and to refer to the modern means of communication and information used by terrorists, to terrorist abductions and hostage-taking for ransom, and political concessions to terrorists.

The third review provides an opportunity to assess the progress made in the implementation of the three pillars of the strategy and to exchange views on ways and means to achieve progress commensurate with the threats posed by terrorism to international peace and security, which are intense, multiple and varied.

Morocco supports the conclusions of the Secretary-General regarding the work of the United Nations in the context of the implementation of the Strategy and the good progress made in that respect. However, we must redouble our efforts to combat the increasing threat of terrorism, which is taking on many new, concrete forms, at the national, regional and international levels.

While we acknowledge the responsibility of States in the implementation of the Strategy, we believe that the United Nations represents the appropriate legal and international framework for crafting adequate responses to terrorism, strengthening coordination and the harmonization of the implementation efforts of States at the national, regional and international levels, and lending assistance to Member States.

In that respect, the Working Group of the Counter-Terrorism Implementation Task Force plays a pivotal role in the attainment of those objectives, in cooperation with the the relevant organs of the United Nations and other organizations.

The capacity of the United Nations has been strengthened by the creation of the United Nations Counter-Terrorism Centre, and we trust that the legal and international framework will be perfected so as to enable the Centre to undertake its work. Member States have great hopes for the Centre, despite the fact that it has just been established, as do national and international organizations and the governmental and non-governmental organizations involved in the combat against terrorism.

Morocco has from the very beginning taken up a very clear, firm and principled position on the combat against terrorism. In 1996 in the General Assembly, Morocco stated that it would cooperate at the international level in the combat against that scourge and has shared its experience internationally by means of the elaboration of a multidimensional and comprehensive strategy that is in accordance with the framework established by the United Nations.

The Moroccan strategy takes into account the initiatives undertaken to address political, social and cultural factors that can strengthen extremist terrorist ideology. Morocco strongly supports the tolerant principles of Islam, the culture of dialogue, respect for human rights, democracy and openness to civil society in the implementation of its strategy. That approach is in keeping with our firm belief that combating terrorism at the national level must not end with the efforts of Governments alone; civil society must participate also and citizens must have an effective role to play in this approach.

National endeavours, whatever they may be and however effective they may prove, will never suffice to counter terrorist activities at the international level, particularly if account is taken of the conditions that prevail at the regional and subregional conditions, which can contribute to promoting terrorist activities, given the profits that can be made from such organized crime.

Here we wish to voice our concern at the upsurge in terrorist activity in the Sahel region, in West Africa and the Horn of Africa, and at the emergence of armed separatist movements, trafficking in drugs, small arms and human beings. Those conditions require a comprehensive and resolute approach based on solidarity, constructive dialogue and awareness of the fact that security must be approached as an integrated whole and with mutual responsibilities for all parties.

Efforts must be coordinated at the regional level, and there must be intensive and unconditional cooperation among the countries of the region so as to devise a collective response on the part of all of the region's capacities, without exception or discrimination. This must be done in cooperation with international organizations and governmental and non-governmental organizations that are responsible for combating terrorism.

Morocco continues to intensify its efforts to support international, regional and subregional initiatives to promote cooperation and the exchange of counter-terrorism expertise. In that respect, I should like to underline Morocco's effective participation in the Global Counterterrorism Forum and in its five working groups. We welcome the Forum's adoption of the Rabat declaration on best practices in the area of criminal justice and on the establishment of national penal systems that are based on the primacy of law as concerns the extradition of criminals and mutual legal assistance.

In the framework of cooperation in the area of criminal justice, I welcome the convention on legal cooperation among African francophone countries, adopted at the fifth meting of the Ministers of Justice of those countries.

At the regional level, we continue to support initiatives aimed at strengthening the capacities of African countries to combat security and terrorist threats, as well as the cooperation being provided by the Saharan and Sahel countries — which involves 28 African States – and welcome the meeting held in Rabat this month aimed at the reorganization of that cooperation to encompass the security and policy areas.

Morocco will soon host the second ministerial meeting on border security in the countries of the Arab Maghreb and the Sahel.

In conclusion, let me stress here that terrorism knows no borders. It cannot be associated with a particular civilization, ethnic group, culture or religion, and that is why it is incumbent on us all to strengthen our commitment and our cooperation in order resolutely to combat the culture of extremism and violence, whatever its origin and by whomsoever such acts may be committed.

Mrs. Dunlop (Brazil): I wish to congratulate you, Sir, and the facilitator of the discussions on the draft resolution (A/66/L.53), Ambassador Guillermo Rishchynski, Permanent Representative of Canada, on the successful conclusion of the United Nations Global Counter-Terrorism Strategy review. We welcome the draft resolution as a positive effort on the part of the United Nations in the fight against terrorism. The draft reaffirms the importance of the Strategy and its four pillars as well as the central role of the General Assembly in addressing the issue. Brazil played an active role during the negotiations on the Strategy. I would like to briefly comment on some of the aspects of the present draft resolution.

While affirming the importance of an integrated, balanced and comprehensive approaeh to the implementation of the Strategy as a whole, Brazil emphasized during the negotiations the importance of redoubling efforts for a more balanced focus on the implementation of pillars I and IV of the Strategy.

Brazil reaffirms its commitment to a coordinated and multidimensional response to the challenges posed by terrorism. The United Nations should be at the forefront of those efforts. Addressing the root causes of that scourge is of the essence. We believe that dealing with the conditions conducive to the spread of terrorism, as stated in pillar I, is the best means to prevent the recurrence of that phenomenon in the long term. As we have emphasized on a number of occasions, prevention is always the best policy.

It is our understanding that giving priority to preventive aspects means tackling the underlying causes of terrorist acts, many of which are fueled by situations of social exclusion and injustice. It is also necessary to promote democratic values and tolerance — political, ethnic and religious — along with cooperation for social and economic development.

Ensuring respect for human rights for all and the rule of law, as stated in pillar IV, is crucial and must be the basis of the fight against terrorism. In that context, I would like to recall what Mr. Ben Emmerson, Special Rapporteur on the promotion and protection of human rights and fundamental freedoms while countering terrorism, said last September during the Symposium on International Counter-Terrorism Cooperation promoted by the Secretary-General:

> "What makes this area so complex, and so difficult, is the ever-present danger that some States, including States with a proud record of respect for the rule of law, have been willing at times to abandon those core values on the pretext of defending them."

We recognize the need to enhance the role the Counter-Terrorism Implementation Task Force plays in the fight against terrorism, and we supported the creation of the United Nations Counter-Terrorism Centre. The Centre, established under the aegis of the United Nations, has the potential to strengthen the efforts to counter terrorism through increased cooperation among Member States.

Brazil favoured the inclusion of a paragraph that highlights the need to support the victims of terrorism. The paragraph approved as consensual language is a positive and action-oriented approach in that regard. We are also pleased that the draft resolution reaffirms the principal responsibility of Member States to implement the Strategy. It recognizes the role that the United Nations plays in that context and acknowledges the importance of coordination and coherence with other international, regional and subregional organizations at all levels.

Brazil shares the view that the regional and subregional dimensions are also essential in the fight against terrorism. At the regional level, the Southern Cone Common Market has established a specialized forum on terrorism in the context of the meetings of the Ministers of the Interior. The forum evaluates and proposes joint intelligence and operational activities against terrorism. In our hemisphere, within the Organization of American States, Brazil played an active role in the negotiations that resulted in the adoption of the Inter-American Convention against Terrorism in June 2002. Moreover, Brazil takes part in the activities of the Inter-American Committee against Terrorism. Brazil stands ready to engage in a dialogue with other regions and subregions to share experiences and challenges in the fight against terrorism. Furthermore, Brazil shares the firm belief that an effective fight against terrorism depends on cooperation among States in the promotion of policies aiming at prevention and repression.

The draft resolution aptly calls upon all States to make every effort to conclude a comprehensive convention on international terrorism. We believe that it would be to the benefit of all to complement existing instruments and ensure that, in tackling the terrorism threat, a strengthened and comprehensive international legal framework is put in place.

The third biennial review of the United Nations Global Counter-Terrorism Strategy is an opportunity for us to reiterate that there are no excuses for terrorist acts. Brazil has historically condemned terrorism in all its forms and manifestations. We are party to all relevant international conventions and protocols against terrorism and pledge once more to fully support the United Nations Global Counter-Terrorism Strategy. Repudiation of terrorism is enshrined in the Brazilian Constitution as a fundamental principle of our international relations.

We also believe that this review provides us with a great opportunity to enhance our understanding of the phenomenon of terrorism in all its complexity. We should not lose sight of the fact that our main purpose when fighting terrorism is to save innocent lives from

that terrible scourge. If we invested our resources in obtaining a deeper comprehension of its origins, we would be able to make the world a safer place. We are hopeful that the third biennial review of the Global Strategy will seize the opportunity to shed light on those important elements.

The meeting rose at 1.05 p.m.